



Camp Staff Application Camp Tanasi

Check One:

New Applicant

Transfer Applicant

Reemployment Applicant

Name _____ Date of Application _____

Present Address _____

Permanent Address (if different from above) _____

Email _____ Camp Name: _____

Home Phone _____ Cell Phone _____

This council is an equal opportunity employer. All applications for employment will be considered without regard to race, religion, color, sex, age, national origin or ancestry, citizenship, disability, genetic information, marital status, or veteran status.

Conditions of employment are stated at the end of this form. Please read carefully before you sign this application. (Application must be completed in full even if attaching resume.)

Education

	High School or General Equivalency Diploma	Undergraduate College/ University	Graduate/ Professional	Business/ Technical
School Name and Location				
Circle Current Year or Years Completed	1 2 3 4	1 2 3 4 5		
Diploma/ Degree				
List any courses related to position(s) desired.				

Current Certification (Proof Required upon Employment)

	Agency	Date of Training	Expiration
<input type="checkbox"/> CPR, Type	_____	_____	_____
<input type="checkbox"/> First Aid, Type	_____	_____	_____
<input type="checkbox"/> Certified Lifeguard	_____	_____	_____
<input type="checkbox"/> Water Safety Instructor	_____	_____	_____
<input type="checkbox"/> Registered Nurse	_____	_____	_____
<input type="checkbox"/> Counselor-In-Training	_____	_____	_____
↑ Other _____	_____	_____	_____

Available Positions

Please see the document titled "Available Resident Camp Staff Positions" and return it with your completed application.

Employment

Business/Organization	Position	Dates	Reason for Leaving	Supervisor	Telephone Number

Previous Camp Experience or Volunteer Activities (List community, school, or other experiences)

Camp/Organization	Position	Dates	Activities	Supervisor	Telephone Number

Training and Skills Development (if not listed under 'Education')

Course	Organization	Location	Date

References

List two (2) references, not related to you who have knowledge of your qualifications for the position for which you are applying. Include, if possible, a recent employer. *You will deliver a Reference Form to the contacts listed below. No application is complete until all references have been received.*

Name	Address	City	State, Zip	Phone

Please describe any camp program, outdoor and/or leadership training and experiences. Include experiences working with children.

2012 Camp Tanasi Work Dates

After you submit your application, the Camp Director will contact you to set up an in-person or phone interview. Please check your email for any correspondence.

Staff are expected to work the following dates unless there is a personal conflict. Please check the weeks that you will work:

- Staff Training: June 10-15 (mandatory)
- Week 1: June 17-22
- Daisy Day: June 23
- Week 2: June 24-29
- Week 3: July 8-13
- Week 4: July 15-20

If you are not able to work a session, please explain: _____

Voluntary Disclosure Statement - All Camp Staff

I hereby authorize Girl Scout Council of the Southern Appalachians to check all my education references and the personal employment references as indicated below; I further authorize these references to release to you all information that they have about me (check all that apply):

Present Employer _____ Previous Employers _____ Additional References Listed _____

Social Security # _____ Other names by which known (e.g., maiden name) _____

School or College _____

Address _____

Driver's License # _____ State _____ Expiration Date _____

1. Previous residence(s) for last **five years** (include college and home residences):

City _____ State _____ Years _____
City _____ State _____ Years _____
City _____ State _____ Years _____
City _____ State _____ Years _____
City _____ State _____ Years _____

(Continue on separate sheet, if necessary.)

2. Have you ever been convicted of any crime relating in any manner to children and/or your conduct with them? Yes No
If yes, please explain on a separate sheet.

3. Have you ever been convicted of any crime including, but not limited to, those listed below and/or any crime similar in any manner to those listed below? Yes No If yes, please explain on a separate sheet.

- Indecent assault and battery on a child under fourteen
- Indecent assault and battery on a mentally retarded person
- Indecent assault and battery on a person who has obtained the age of fourteen
- Rape
- Rape of a child under sixteen with force
- Assault with intent to commit rape
- Kidnapping of a child under sixteen with intent to commit rape
- Distribution and trafficking of narcotics or other controlled substances
- Intent to commit any of the above crimes

4. Have you ever been adjudged liable for civil penalties or damages involving sexual or physical abuse of children? Yes No
If yes, please explain on a separate sheet.
5. Are you now or have you ever been subject to any court order involving sexual or physical abuse of a minor, including, but not limited to a domestic order or protection? Yes No If yes, please explain on a separate sheet.
6. Have your parental rights ever been terminated for reasons involving sexual or physical abuse of children? Yes No
If yes, please explain on a separate sheet.

I understand that:

- a. The camp may deny employment to any person who answers “yes” to any one of questions 2-6. If hired and the employer later discovers circumstances that would indicate a “yes” answer to any of the above questions, employment may be terminated immediately.
- b. The information provided on this form is subject to verification, which may include a criminal history check and request from any Central Registry of child abusers.
- c. The camp may terminate employment or volunteer service of any person if that person is found, regardless of when discovered, to:
 - 1) have a history of complaints of abuse of a minor;
 - 2) have resigned, been terminated or been asked to resign from a position whether paid or unpaid, due to complaint(s) of sexual abuse of a minor; and/or
 - 3) have falsified or omitted information in this disclosure statement.
- d. This disclosure statement must be updated yearly.

Do you know of any reason why you would not be able to perform the essential functions of the job position for which you are applying with or without reasonable accommodation? Yes No If yes, please describe:

Are you legally eligible to be employed in the United States? Yes No (Proof required upon employment)

I understand the completion of a physical examination and current health history is a condition of employment.

I understand that drug testing is required and Camp Tanasi is a drug free workplace.

I certify that my answers to the preceding questions are true and complete and that I have not knowingly withheld any information which might, if disclosed, affect my application unfavorably. I understand that any misrepresentation or omission of facts on this application will be cause for rejection of this application or dismissal after employment and that employment is subject to verification of references.

I understand that this employment application and any other Girl Scout documents are not contracts of employment, and that any individual who is hired may voluntarily leave employment upon proper notice and may be terminated by the council at any time. I understand that any oral or written statements to the contrary are hereby expressly disavowed and should not be relied upon by any prospective or existing employee. I also understand that I am submitting this application to become an employee of the Girl Scout Council of the Southern Appalachians, Inc. and not GSUSA. Drug Testing may be required.

I certify that my answers to the preceding questions are true and complete and that I have not knowingly withheld any information which might, if disclosed, affect my application unfavorably. I understand that any misrepresentation or omission of facts on this application will be cause for rejection of this application or dismissal after employment and that employment is subject to verification of references.

Print Name _____

Signature _____ Date _____

Signature of Minor’s Parent/Guardian (if under 18) _____ Date _____

Send Completed Applications To:
 Girl Scout Council of the Southern Appalachians
 ATTN: Camp Tanasi
 1567 Downtown West Blvd
 Knoxville, TN 37919

Have Questions?
 Becky Cavender, Camp Director
 800.474.1912
 rcavender@girlscoutcsa.org