Dakotas United Methodist Camping Staff Application

All persons seeking employment with Camp Dakotas, a ministry of the Dakotas Annual Conference of the United Methodist Church, are required to complete this application form in paper or online at dakcamps.org. The information provided on this form is confidential and is requested for the wellness of our campers, volunteers, leaders, staff and conference programming agencies.

Camp Dakotas is an equal-opportunity employer and makes its employment decisions without regard to race, color, creed, sex, national origin, age, handicap, or other protected status under local, state, or federal Equal Opportunity Laws.

Thank you for your interest in this ministry!

PERSONAL INFORMATION			
First Name: Last Name:			
Permanent Address:			
City:	State:	Zip:	
Is this a permanent address? (Yes or No)			
Phone:			
Email address:			
Gender:			
Name of Church or Faith Community with which you are c	onnected:		
Denomination (If not United Methodist): (Optional)			
I am interested in a position at: (Check all that apply)			
Lake Poinsett Camp & Living Waters Retreat Center			
Storm Mountain Center			
Wesley Acres Camp & Retreat Center			
Minnesota United Methodist Camp			
What type of position do you want at camp?			
Dates Available for Employment			
From: To:			
Please list specific dates you need to request off during the	e summer:		

Age group you feel most comfort	able working with (Check all that apply):
Pre-K	Middle School/Junior High School
Elementary School	Senior High School
Can you perform the essential fur accommodation?	actions of the job for which you have applied with or without reasonable
Yes No	
If you are hired, would you desire	or need housing for any person(s) other than yourself at camp?
Yes N0	
EMPLOYMENT HISTORY	
Employer 1	
Company Name:	
Address:	
Start Date: End Date	
Position:	Salary/Hourly Wage:
Supervisor/Manager:	
Reason for Leaving:	
May we Contact this Employer? _	Yes No
If no, why do you wish for us not	to contact your supervisor?
Employer 2	
Company Name:	
Address:	
Start Date: End Date	2:
Position:	Salary/Hourly Wage:
Supervisor/Manager:	
May we Contact this Employer? _	Yes No Phone #:
If no, why do you wish for us not	to contact your supervisor?

Employer 3 Company Name: Start Date: _____ End Date: _____ Position: Salary/Hourly Wage: Supervisor/Manager: _____ Reason for Leaving: May we Contact this Employer? ____ Yes ____ No Phone #: _____ If no, why do you wish for us not to contact your supervisor? **REFERENCES** Please list the pastor of your local congregation and two other persons (non-relatives) who have knowledge of your character, work habits, volunteer experience or abilities. Reference 1 Name: _____ Email Address: _____ Day Phone: _____ Reference 2 Email Address: _____ Day Phone: _____ Reference 3 Name: _____ Email Address: ______ Day Phone: _____ **CAMP EXPERIENCE** Please list camps you attended in the past. Camp Name #1: Camp Director: Location: Dates Attended: _____

What was your position at	Camp #1?		
Camper	Employee		
Volunteer	No Answer		
Camp Name #2:			
Camp Director:			
Location:			
Dates Attended:			
What was your position at			
Camper	Employee		
Volunteer	No Answer		
Camp Name #3:			
Camp Director:			
Location:			
Dates Attended:			
What was your position at	Camp #3?		
Camper	Employee		
Volunteer	No Answer		
EDUCATION			
Educational Background: (P	Please check all that apply to you)		
High School	Technical/Trade School		
College	Graduate School		
Seminary	Other :		
CAMP PROGRAM SKILLS			
In the following list, please	check mark those items in which	you have experience and sk	ills:
Adventure/Challenge			
Challenge/Ropes Coul	rse Climbing/Rappelling	Spelunking/Caving	3
Arts & Crafts			
Ceramics/Pottery	Drawing/Painting	Leather Craft	Metal Work
Photography	Woodworking		
Camping/Pioneering			
Backpacking	Camping	Hiking	Orienteering
Outdoor Cooking	Outdoor Living Skills	Wilderness Trips	

Nature			
Animals/Animal Care	Astronomy	Environmental Studies	Birds
Flowers	Forestry	Insects	Weather
Rocks/Minerals			
Sports/Fitness			
Aerobics/Exercise	Archery	Baseball/Softball	Basketball
Bicycling/Biking	Boxing	Fencing	Fishing
Football	Hockey (ice/in-line)	Gymnastics	Golf
Horseback Riding(English)	Horseback Riding (Wester	rn) Martial Arts	Riflery
Skating (Ice, Roller, in-line)	Soccer	Tennis	Track/Field
Volleyball	Wrestling		
Drama/Music			
Theatre	Clowning	Dance	Singing
Instruments			
Miscellaneous			
Academics	Aviation	Community Service	Farm/Ranch
Gardening	Foreign Language	Leadership Development,	/CIT
Radio/TV/Video	Religious Studies	Storytelling	Team Build
Working with persons with special needs Worship service leadership		ip	
Waterfront Activities			
Board Sailing	Wind Surfing	Canoeing	Diving
Kayaking	Rafting	Rowing	Sailing
Scuba	Swimming	Synchronized Swim	Water Ski
WSI: Water Safety Instructor	WSI: Water Safety Instructor Watercraft/Canoe Instructor		ctor
What three activities would you be several times per week or camp ses		? You may be asked to teach the	ese activities
CAMP SUPPORT STAFF SKILLS In the following list, please check m	ark those items in which yo	u have experience and skills.	
Business/Administration			
Bookkeeping/Accounting	Computer/Technical	Computer/Software	

Health/Safety			
CPR	First Aid	Lifeguard	Nursing
Maintenance			
Auto Mechanics	Carpentry	Electrical	Plumbing
Food Service			
Cooking/Meal Prep	Menu Planning	Purchasing	Sanitation
Food Handler's Permit	Certification		
CERTIFICATIONS			
Please list all current certific	ations you hold:		
Do you possess any special s Dakotas UM Camping Minist	=	enefit you as an employee and e	enrich the ministry of
Dakotas Olvi Camping iviinisi	ну:		
ANSWER THESE OLIESTIONS	CONIVIE ADDIVING FOR A D	OSITION REQUIRING DRIVING	
Do you have a valid driver's		SSITION REQUIRING DRIVING	
YesNo			
Do you have current chauffe			
Yes No	di s type license:		
Do you have a commercial d	rivor's liconso?		
	river s licerise:		
YesNo			
APPLICATION QUESTIONS			
	etch, including specialized transfer whi	aining in camping, and experiend ch you are applying.	ce or training in other
What are your reasons for a	pplying with Dakotas UM Car	nping?	

What contributions do you think you can make at camp?

What contributions do you think a well-run camp can make to children	n?
What would you expect to get out of your experience working at Dako	otas UM Camp?
Please describe one experience that helped you grow in your faith.	
List any experience you have had working with children or youth.	
List any organization you are involved with on your school campus or	in your community.
BACKGROUND CHECK	
All potential employees are required to pass a background check prior Background checks are run after an interview has been completed.	r to being hired by Dakotas UM Camping.
APPLICANT STATEMENT	
By my signature below, I promise that the information provided in this documentation or interview) is true and complete, and I understand to significant omissions may disqualify me from further consideration for from employment, if discovered at a later date.	hat any false or misleading information or
I hereby acknowledge and agree that my employment by any United Notice on the constitute an "employment at will." This means that my employer and employment at any time for any reason. I have read all the information job and camp policy information, and agree to uphold the same.	d I will have the right to terminate the
Signature of Authorization (If you agree)	Date
Do you meet or exceed the age 18 minimum age requirement?	
Yes No No Answer	

You are welcome to also include a copy of your resume, cover letter, and certifications.

Thank you for your employment application to be a part of the Christian camping ministry of the Dakotas United Methodist Camp.

We hope to see you this summer at camp for a life-changing and faith shaping experience!

God's Blessings,

Dakotas UM Camping Staff

Email: info@dakotas.com Phone: Toll Free 855-622-1973 Web Site: dakcamps.org