

# 2018 Application for CEDARS COUNSELORS & PROGRAM LEADERS

The purpose of The CEDARS Camps is: "To give each camper an appreciation of spiritual sense and an abundance of wholesome, joyous activity."

Date: \_\_\_\_\_

Name (as on Social Security card) Soc. Security# Drivers License# State #Citations M/F Birth date

Address City State Zip Code Your Primary E-mail Your Cell Phone #

Parent(s) or Guardian(s) Address (if different) City State Zip Parent/Guardian Phone

Applying (as needed) for: \_\_P.D./S.D.D./A.D.\_\_ Wrangler \_\_Sr. C. (HS grad & 18+) \_\_Jr. C. (passed CIT, 17+)

## **DATES:** Indicate 1st & 2nd choice: Senior Staff dates:

**P.D./S.D.D./A.D./** \_\_\_ May 25 – May 28 (Memorial Wkend)

**Sr. C/Wrangler:** \_\_\_ June 10 - Aug. 4 (8 wks–1-4 sess.)

\_\_\_ June 10 - July 7 (4 wks. 1-2 sess.)

\_\_\_ July 7 - Aug. 4 (4 wks. 3-4<sup>th</sup> sess.)

\_\_\_ Aug. 5 - Aug. 10 (6 day Family Camp)

Other \_\_\_\_\_

## Junior Counselors dates:

**Jr.C.:** \_\_\_ May 25 – May 28 (Mem. Weekend)

\_\_\_ June 10 - 23 (2 wks – 1<sup>st</sup> sess.)

\_\_\_ June 24 – July 7 (2 wks – 2<sup>nd</sup> sess.)

\_\_\_ July 8 – July 21 (2 weeks – 3<sup>rd</sup> sess.)

\_\_\_ July 22 – Aug 4 (2 weeks - 4<sup>th</sup> sess.)

\_\_\_ Aug 5 - Aug. 10 (6 day – 5<sup>th</sup> sess.)

**Required Pre-Camp Training - Certification Clinics:** \_\_\_ May 29 – June 6 \_\_\_ June 3 - June 6

**Meta-Bonding:** \_\_\_ June 6-9 for ALL staff, including 2<sup>nd</sup> group, if possible –or \_\_\_ July 7 if not

## Educational and Career Information:

Grade in School (next September)

Name of School Attending (next fall), if applicable

Academic Major(s) and Minor(s) if in College or Grad School. Favorite Subjects if in High School.

List your career interests and top professional skills you hope to build on staff.

## On an attached sheet, please address these questions:

1) What do you feel you can offer to CEDARS Camps?

2) What are some of the things you appreciate most about Christian Science? How you can share this appreciation with campers and staff?

3) Describe your reasons for committing to uphold CEDARS Community Standards while under contract (i.e. abstinence from tobacco, alcohol & drugs and from premarital sexual relationships of all kinds; commitment to honesty and the Golden Rule).

4) List your previous camp experiences and number of years as a paid staff member.

5) List academic, sports or other awards you have received and any extracurricular activities or skills that could benefit camp.

**Memberships and Service to Church:**

Have you joined The Mother Church? \_\_\_ When? \_\_\_ Active CSO or Branch Church member? \_\_\_  
Do you regularly attend Christian Science Church and/or CSO services? \_\_\_ and/or Sunday School? \_\_\_  
Where? \_\_\_ Have you had Christian Science Class Instruction? \_\_\_ When? \_\_\_  
Are you currently a Sunday School Teacher (outside of camp) \_\_\_

**Activities:** Please *circle* the activities that you are qualified to **teach** and *check* those in which you can assist.

- |  |  |   |
|--|--|---|
| <input type="checkbox"/> Archery                             | <input type="checkbox"/> Fire Building                 | <input type="checkbox"/> Sunday School (must be 20+ years & member of The Mother Church; class instruction preferred for teaching hs classes) |
| <input type="checkbox"/> Arts and Crafts, Basket Weaving     | <input type="checkbox"/> Fishing                       | <input type="checkbox"/> Swimming   |
| <input type="checkbox"/> Bible Lands Park Ranger/Facilitator | <input type="checkbox"/> High and Low Challenge Course | <input type="checkbox"/> Trampoline   |
| <input type="checkbox"/> Campcrafts/Wilderness Camp          | <input type="checkbox"/> Horseback Riding              | <input type="checkbox"/> Wakeboarding (behind boat)   |
| <input type="checkbox"/> Cable Skiing (6-tower system)       | <input type="checkbox"/> Instruments Played _____      | <input type="checkbox"/> Water Skiing (behind boat)   |
| <input type="checkbox"/> Canoeing                            | <input type="checkbox"/> Log Rolling                   | <input type="checkbox"/> Wake Surfing   |
| <input type="checkbox"/> Caving                              | <input type="checkbox"/> Nature                        | <input type="checkbox"/> Zip line Certification   |
| <input type="checkbox"/> Climbing/Bouldering/Rappelling      | <input type="checkbox"/> Singing                       | <input type="checkbox"/> Others _____   |
| <input type="checkbox"/> Dance                               | <input type="checkbox"/> Sports (which?) _____         |   |
| <input type="checkbox"/> Drama                               |  |   |

**Certifications:**

\*Archery Certified? \_\_\_ When \_\_\_ \*CHA Riding Instructor Certified? \_\_\_ (Level) \_\_\_ Expires \_\_\_  
\*Cable Ski Operator Certified? \_\_\_ \*Certified as a Boat Captain by a pro Boat Master? \_\_\_  
LGT (Lifeguard) Certified? \_\_\_ Expires \_\_\_ CPR Certified? \_\_\_ Expires \_\_\_  
1<sup>st</sup> Aid Certified? \_\_\_ Expires \_\_\_ WSI Certified? \_\_\_ Expires \_\_\_  
\*Low Ropes/ Team Course Certified? \_\_\_ Expires \_\_\_ \*High Ropes Course Certified? \_\_\_ Expires \_\_\_  
\*Zipline Certified Expires \_\_\_ Ticket-free driving to become (when of age) a Certified van driver? \_\_\_

**\*If any of the starred certifications were not completed at CEDARS, please provide additional information (where completed, certifying organization or individual, level achieved, etc.)**

**Qualifications:** For each activity that you can teach or assist, list any additional relevant experience or qualifications (beyond the certifications and memberships above):

**Required Background Checks:**

Have you been suspended or expelled from school? \_\_\_ When? \_\_\_ If so, why? \_\_\_  
\_\_\_ (initial here) For state laws, I confirm that I have never been convicted of crimes related to children.  
\_\_\_ (initial here) I give my permission for a criminal background check to be conducted prior to employment.

**Required References:** Must be over 21 and cannot be personal relatives. Individuals listed must be external (not the prospective employer).

**Character Reference\*:** \_\_\_\_\_

Name Email Phone

**C.S. Practitioner, C.S. Employer or Sunday School Teacher\*:** \_\_\_\_\_

Name Email Phone

**Please send Application to: CEDARS, Warren Huff, Executive Director** (email [director@cedarscamps.org](mailto:director@cedarscamps.org))  
(November - May) 1314 Parkview Valley Drive, Ballwin, MO 63011-4206 PH:(636) 394-6162 Fax: (775) 264-6826  
(June - October) 19772 Sugar Drive, Lebanon, MO 65536-7673 PH: (417) 532-6699 Fax: (775) 264-6826