

# PNW Youth Camp 2022 STAFF Application

COMPLETE AND MAIL TO: 8711 TIETON DR YAKIMA, WA 98908  
A \$10 BACKGROUND CHECK FEE IS REQUIRED WITH SUBMISSION



MUST BE 21 YEARS OF AGE TO SERVE AS CABIN LEADER AT TEEN CAMP

PLEASE SELECT DESIRED POSITION:  CABIN LEADER  RECREATION STAFF  KITCHEN STAFF  WHERE NEEDED

CAMP GROUND LOCATION: MAYFIELD CAMPGROUND 394 Winston Creek Rd, Mossyrock, WA 98564

Teen Camp (Grades 6<sup>th</sup>-12<sup>th</sup>) JUNE 27<sup>TH</sup>-July 1st

Shirt Size: S M L XL 2XL OTHER: \_\_\_\_\_

PLEASE PRINT LEGIBLY:

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY/STATE/ZIP \_\_\_\_\_

HOME PHONE: \_\_\_\_\_

WORK PHONE: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

How long have you lived at this address? \_\_\_\_\_

If less than two years, give previous address below (for sake of background check).  
\_\_\_\_\_

## PERSONAL INFORMATION

BIRTHDATE \_\_\_\_\_

PLACE OF BIRTH \_\_\_\_\_

MALE \_\_\_\_\_

FEMALE \_\_\_\_\_

MARRIED \_\_\_\_\_

SINGLE \_\_\_\_\_

HAIR \_\_\_\_\_

EYES \_\_\_\_\_

Do you have any health problems or physical limitations? yes \_\_\_\_\_

no \_\_\_\_\_

If yes, please explain  
\_\_\_\_\_

List any allergies you may have:  
\_\_\_\_\_

List any medications you are taking:  
\_\_\_\_\_  
\_\_\_\_\_

**ADDENDUM TO CABIN LEADER / STAFF APPLICATION**

1. Have you ever been convicted of or pleaded guilty to a sexual assault, sexual abuse or child abuse?

Yes \_\_\_\_\_ No \_\_\_\_\_

2. Have you ever been convicted of or pleaded guilty to a felony? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, explain \_\_\_\_\_  
\_\_\_\_\_

3. Have you ever been charged, arrested, convicted of or plead guilty to any crime?

Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, would you be willing to discuss this matter with a pastor or ministry leader?

Yes \_\_\_\_\_ No \_\_\_\_\_

4. Have you ever been accused, charged, or alleged to have committed any act of neglecting, abusing, or molesting a child or youth? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, would you be willing to discuss this matter with a pastor or ministry leader?

Yes \_\_\_\_\_ No \_\_\_\_\_

5. Are you currently engaged in sexual immorality (ie. Heterosexual or homosexual relations)?

Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, would you be willing to discuss this matter with a pastor or ministry leader?

Yes \_\_\_\_\_ No \_\_\_\_\_

6. Have you ever been accused, charged or alleged to have committed a theft?

Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, would you be willing to discuss this matter with a pastor or ministry leader?

Yes \_\_\_\_\_ No \_\_\_\_\_

7. Are you addicted to prescription drugs? Yes \_\_\_\_\_ No \_\_\_\_\_

8. Do you use tobacco in any form? Yes \_\_\_\_\_ No \_\_\_\_\_

9. Do you drink alcoholic beverages? Yes \_\_\_\_\_ No \_\_\_\_\_

10. Do you take illegal drugs? Yes \_\_\_\_\_ No \_\_\_\_\_

11. Do you view pornographic materials? Yes \_\_\_\_\_ No \_\_\_\_\_

12. Have you filled out a background check through your local church? Yes \_\_\_\_\_ No \_\_\_\_\_ If you answered no there is a \$10.00 background check fee.

## SPIRITUAL STATUS

(Check appropriate space)

Saved \_\_\_\_\_ Sanctified \_\_\_\_\_ Holy Ghost Baptism \_\_\_\_\_

Baptized in water \_\_\_\_\_ Church Member \_\_\_\_\_

Name of church you attend:

\_\_\_\_\_

### Ministry Leader Reference (Other than Pastor)

Name: \_\_\_\_\_ Ministry Position: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Name of

Pastor: \_\_\_\_\_

**NOTE: A PASTORS RECOMMENDATION IS RERQUIRED FOR CONCIDERATION. IF YOU ARE FILLING OUT THIS FORM ONLINE THE PASTORS RECOMMENDATION WILL BE SENT TO YOUR PASTOR VIA EMAIL. IF YOU ARE FILLING OUT A PHYSICAL FORM, MAKE SURE YOU GIVE THE PASTORS RECOMMENDATION PORTION TO YOUR PASTOR.**

### APPLICANT'S STATEMENT

The information contained in this application is correct to the best of my knowledge. I authorize any references listed in this application to give you any information (including opinions) that they may have regarding my character or fitness for children or youth work. In consideration of the receipt and evaluation of this application by the Church of God, I hereby release any individual, church, youth organization, charity, employer, reference, or any other person or organization, including record custodians, both collectively and individually, from any and all liability for damage of whatever kind or nature which may at any time result to me, my heirs, or family, on account of compliance or any attempts to comply, with this authorization. I waive any rights that I may have to inspect any information provided about me by any person or organization identified by me in this application. Should my application be accepted, I agree to be bound by the Bylaws and policies of the Church of God, and to refrain from unscriptural conduct in the performance of my services on behalf of the church. I further state that I HAVE CAREFULLY READ THE FOREGOING RELEASE AND KNOW THE CONTENTS THEREOF AND I SIGN THIS RELEASE AS MY OWN FREE ACT. This is a legally binding agreement which I have read and understand.

**Applicant's Signature:** \_\_\_\_\_

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

### STATEMENT OF RESERVATION:

*While no one is rejected to work or attend Church of God youth camp on the basis of race, color, or creed, the State Director of Youth and Discipleship does reserve the right to accept or reject any application for volunteer work at Church of God youth camps after review of said application reveals that the services of the applicant would or would not be in the best interest and success of the camp.*

## YOUTH CAMP 2022 SENIOR PASTOR STAFF ENDORSEMENT

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*Applicant's Name*

*Applicant's Local Church and city*

**No applicant can be accepted to work at youth camp without the endorsement of their local pastor. This form must be completed in its entirety before any application can be considered.**

**PASTOR:** Please take a few minutes to complete this endorsement form for the person listed above whom is applying for consideration of a youth camp position this summer. Your endorsement is not only required, but allows for the protection of campers and other staff in the camp setting. Should you have questions or problems, please direct them to the Regional Youth and Discipleship Director's office at 509-965-0075, or you may email your questions to *treasurer@pnwcog.org*. Once you have completed this form in its entirety, immediately mail to:

**PNW Regional Office**

**Youth Camp 2022**

**8711 Tieton Dr**

**Yakima, WA 98908**

How well do you know the applicant? \_\_\_\_\_ Very Well \_\_\_\_\_ Rather Well \_\_\_\_\_ Casually \_\_\_\_\_ Do not know this person

**Please circle the phrase that best describes your assessment of the applicant's behavior. Feel free to attach additional pages if you feel comments are required for explanation. Your comments will be taken seriously and are confidential.**

**APPEARANCE:** flawless well-groomed generally neat slovenly

**DEPENDABILITY:** exceptional usually dependable requires supervision irresponsible

**INITIATIVE:** self-motivated industrious has necessary drive indifferent

**PERSONALITY:** bland pleasing outgoing magnetic

**COOPERATION WITH PEERS:** inspires confidence cooperates willingly usually cooperative obstructionist

**LEADERSHIP:** inspirational able to take charge good team member incapable of leading

**ATTITUDE:** always enthusiastic positive generally acceptable negative

**COMMON SENSE:** lacking needs experience usually sound uses sound judgment

**ORAL EXPRESSION:** eloquent excellent grammar satisfactory limited

**INTEGRITY:** always trustworthy generally reliable sometimes lacking cannot be trusted

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This applicant is a Christian: \_\_\_\_Yes \_\_\_\_No

This applicant is a member or my local church: \_\_\_\_Yes \_\_\_\_No This

applicant is faithful in tithing and attendance: \_\_\_\_Yes \_\_\_\_No

This applicant has received the baptism of the Holy Spirit: \_\_\_\_Yes \_\_\_\_No

Has this applicant had a background check done through the local church? \_\_\_\_Yes \_\_\_\_No

**PASTORAL RECOMMENDATION**

\_\_\_\_HIGHLY RECOMMEND \_\_\_\_RECOMMEND \_\_\_\_DO NOT RECOMMEND

I certify that the above applicant is a capable and qualified person to work in Church of God youth camp and I give them my highest recommendation to serve in any capacity deemed necessary by the Regional Director of Youth and Discipleship 2022 Youth Camp.

Worker applications will not be accepted without this signature AND a completed Sr. Pastor Staff Endorsement Form (attached)

**Pastor's Signature and Date**

Mail to: PNW REGIONAL OFFICES 8711 Tieton Dr. Yakima, WA 98908