

Riverside Bible Camp

Staff Application (Volunteer) 2024

Please attach a recent picture of yourself.

Please include a police background check with a vulnerable sector check. This is required for all staff and volunteers over 18. This may be obtained at your local RCMP.

| Please print clearly | | | | | |
|----------------------|---------------|---------|--------|-----------------|--------------------|
| Full Name: | | | | | _ |
| Birth Date: | Age: | N | /lale | Female | (please check one) |
| Health Care #: | A | AB (| Other | _ | |
| Permanent Address: | | _ (| City: | | _ |
| Province: | Postal C | ode: | | - | |
| Alternate Address: | | | | | |
| Email Address: | | | | | |
| Phone #: | | | | | |
| Marital Status:Sir | ngleN | Married | En | gaged (please o | check one) |
| POSITION APPLYING FO | OR: | F | OR WHI | CH WEEK? (Ch | eck all choices) |
| Senior Cabin Leade | er(18+ years | old) _ | Seni | or High 16-18 C | Camp July 7-12 |
| Junior Cabin Leade | er (16+ years | old) _ | Child | dren's 8-10 Can | np July 14-19 |
| Nurse (18+ years o | ld) | _ | Junio | or High 13-15 C | amp July 21-26 |
| Crew Leader (18+ y | ears old) | _ | Kids | 10-11 Camp Ju | ıly 28-Aug 2 |
| Crew Worker (14+ | years old) | _ | Squi | rts 6-8 Camp A | ugust 6-8 |
| Maintenance | | _ | Inter | mediate 11-12 | Camp August 11-16 |
| Kitchen Help (16+ y | ears old) | | | | |
| Other (please spec | ify) | | | | |

Personal Information:

(Please use a separate sheet to answer)

Why are you applying for this position?

Please answer the following:

- Briefly describe your salvation experience. IE How you became a Christian. When?
 (Support with scripture)
- 2. How would you lead someone to Christ? (Use scripture)
- 3. Describe your current relationship with Christ.
- 4. Describe your current devotional and prayer life.
- 5. What is God currently teaching you?
- 6. What are your strengths and talents? (Don't be modest)
- 7. In what areas do you feel you need further growth?
- 8. List your hobbies and interests.
- 9. Where/How are you serving right now?

Camping Skills and Experience

State briefly your experience as a camper.

State briefly your experience as a camp staff member.

Medical History

| Do you suffer any medical/emotional conditions that would in any way restrict normal activities | | | | |
|---|--|--|--|--|
| including land and water sports? | | | | |
| Yes No If yes, please explain. | | | | |
| | | | | |
| Do you have any allergies? | | | | |
| Yes No If yes, please explain. | | | | |
| | | | | |
| Are there any medications that may not be administered to you? | | | | |
| Are you on a special diet? | | | | |
| Yes No If yes, please explain. | | | | |

| Emergency Contact |
|--|
| Next of Kin/Parents/Family: |
| Address |
| Phone Number |
| My health information is accurate to my knowledge, and I give permission to the Doctor/Nurse selected by the camp to provide me with medical treatment in case of emergency. |
| Date: Signature (Parent if under 18): |
| Activities |
| What church do you attend? |
| What are your church and/or school involvements in the last years? |
| Skills: Do you play an instrument? |
| Do you have a certificate for: Archery Riflery CanoeingRock Climbing |
| Are you interested in leading any of these skills? (If yes, mark with an X.) |
| Geek Squad Games/Sports Archery Canoeing/Swimming Riflery |
| Drama Crafts Rockwall(requires training) |
| Do you have First Aid Training? Yes No |

Please email the completed application form to: riversidebiblecamp@outlook.com Or mail to: Riverside Bible Camp, Box 14, Dixonville, AB, T0H 1E0

REFERENCES

Please provide the names and addresses of your Pastor/Youth Pastor and 2 adults over the age of 25 years of age who are not your relatives. Please inform them that you have used their names.

Please send a copy of the Character Reference forms to each of your references, to be returned by email to riversidebiblecamp@outlook.com or mailed to Riverside Bible Camp, Box 14, Dixonville, AB, T0H 1E0

| Name: | Name of Pastor/Youth Pastor and Phone Numbers | | | | |
|---|---|--|--|--|--|
| Name: | | | | | |
| Address: | Reference # 1 | | | | |
| Reference # 2 Name: | Name: | Relationship: | | | |
| Reference # 2 Name: | Address: | | | | |
| Name: | | | | | |
| Address: | Reference # 2 | | | | |
| Reference # 3 Name: | Name: | Relationship: | | | |
| Reference # 3 Name: | Address: | | | | |
| Name: | Phone Number: | _ | | | |
| Phone Number: Confidentiality Waiver (to be completed by applicant) I authorize the release of the disclosed information by the person completing this Character Reference/Recommendation for the consideration of the applicant. I waive any right or privilege to inspect or challenge the contents of this reference. I understand that the information will be held in confidence by Riverside Gospel Fellowship and will not be released to anyone (other than the directors and/or board members), without the permission of the person giving such character reference, or in the absence of a Court Order, Subpoena, or laws requiring the disclosure or such information. Applicant's Printed Name: | Reference # 3 | | | | |
| Confidentiality Waiver (to be completed by applicant) I authorize the release of the disclosed information by the person completing this Character Reference/Recommendation for the consideration of the applicant. I waive any right or privilege to inspect or challenge the contents of this reference. I understand that the information will be held in confidence by Riverside Gospel Fellowship and will not be released to anyone (other than the directors and/or board members), without the permission of the person giving such character reference, or in the absence of a Court Order, Subpoena, or laws requiring the disclosure or such information. Applicant's Printed Name: | Name: | Relationship: | | | |
| Confidentiality Waiver (to be completed by applicant) I authorize the release of the disclosed information by the person completing this Character Reference/Recommendation for the consideration of the applicant. I waive any right or privilege to inspect or challenge the contents of this reference. I understand that the information will be held in confidence by Riverside Gospel Fellowship and will not be released to anyone (other than the directors and/or board members), without the permission of the person giving such character reference, or in the absence of a Court Order, Subpoena, or laws requiring the disclosure or such information. Applicant's Printed Name: | Address: | | | | |
| I authorize the release of the disclosed information by the person completing this Character Reference/Recommendation for the consideration of the applicant. I waive any right or privilege to inspect or challenge the contents of this reference. I understand that the information will be held in confidence by Riverside Gospel Fellowship and will not be released to anyone (other than the directors and/or board members), without the permission of the person giving such character reference, or in the absence of a Court Order, Subpoena, or laws requiring the disclosure or such information. Applicant's Printed Name: | Phone Number: | _ | | | |
| will not be released to anyone (other than the directors and/or board members), without the permission of the person giving such character reference, or in the absence of a Court Order, Subpoena, or laws requiring the disclosure or such information. Applicant's Printed Name: Applicant's Signature: Date: | I authorize the release of the discl Reference/Recommendation for the | losed information by the person completing this Character he consideration of the applicant. I waive any right or privilege | | | |
| Date: | will not be released to anyone (oth permission of the person giving subpoena, or laws requiring the d Applicant's Printed Name: | ner than the directors and/or board members), without the uch character reference, or in the absence of a Court Order, lisclosure or such information. | | | |
| Date: | Applicant's Signature: | | | | |
| Signature of Parent/Guardian (it linder 18). | Date:Signature of Parent/Guardian (if u | under 18): | | | |

Riverside Bible Camp Reference Letter 2024

| Applicant's Name: |
|--|
| Dear Referrer: |
| Riverside Gospel Fellowship hosts groups of over 70 children, youth, and young adults for up to 6 days at a time. We do this consistently for a 6 week period during the summer. Caring for, |
| working with, and teaching these young people is a 24 hour/day responsibility that is not easy. We require our staff to be dedicated, energetic, wise, compassionate, positive, and morally |
| pure, as well as being willing to learn and grow throughout the summer. While we seek to |
| uphold a standard of godliness and purity among our staff, we also recognize that we all have shortcomings and weaknesses. We ask you to not only share your perception of the applicant's |
| conduct and character, but also their capacity and willingness to grow as a disciple of Jesus |
| Christ. Please answer the following questions honestly, so that we can make an accurate assessment. All information will be held confidential. |
| What are the applicant's Christian characteristics? |
| How would you describe the applicant's personality? |
| How is the applicant's spiritual life/commitment? |
| Does the applicant go to church regularly, irregularly, or every so often? Is the applicant involved |
| in the church? If so, how? |
| Talents and/or special abilities. |
| |
| Do you know what the applicant's work habits are like? Please describe. |
| |

Please rate the applicant in the following as Good, Bad, Needs Improvement, and include comments.

- 1. Leadership
- 2. Motivation
- 3. Communication skills
- 4. Self-discipline/independence
- 5. Creativity
- Self-confidence
- 7. Warmth of personality
- 8. Concern for others
- 9. Reaction to setbacks
- 10. Respect for classmates/fellow workers
- 11. Respect for elders/authority
- 12. Judgment

alcohol, tobacco, non-medicinal drugs, addictions to gambling, tendency towards dishonesty, occult activity, use of inappropriate media, foul language, and/or sexual immorality?

I recommend this applicant: _____with reluctance ___willingly ____with enthusiasm

Referrer's Name (please print) ____

Address ____

Contact Phone Number ____

Relationship to the applicant _____

Signature: ______ Date: ______

Is there any other pertinent information we should know about the applicant? Such as: use of

Thank you for taking the time to fill up this reference form for this applicant. We take a weighty view of these references and your assessment is highly valued and appreciated.

Please email the reference forms to: riversidebiblecamp@outlook.com OR mail to Riverside Bible Camp, Box 14, Dixonville, AB, T0H 1E0