



Personal Information

Name _____

Current Address _____ (Number/Street/City/State/ZIP) Current Phone (_____) _____

If current address is temporary, indicate last date you can be reached there _____

Permanent Address _____ (Number/Street/City/State/ZIP) Permanent Phone (_____) _____

Email Address _____

Camp Choice (Indicate choice(s) by listing interest level, such as "1" for your first choice, in front of that camp.)

_____ Arrowhead _____ Cleawox _____ Low Echo _____ Whispering Winds

Position Desired (Indicate choice(s) by listing interest level, such as "1" for your first choice, in front of that position.)

_____ Camp Director _____ Assistant Camp Director _____ Program Coordinator
 _____ Counselor In Training Director _____ Unit Counselor _____ Program Specialist
 _____ Cook _____ Kitchen Aid
 _____ CIT 2 (Only for those who have successfully completed CIT 1 with GSOSW)

Which areas, i.e. waterfront (all), archery (Arrowhead, Cleawox, Low Echo), horses (Whispering Winds), challenge (Arrowhead), crafts (all), nature (all)

Education

School Name & Location	Years Completed	Diploma/Degree/Credits	Course of Study	Honors, Training, Special Skills

Work Experience (Paid or volunteer. Please list most recent experience first.)

Name of Employer _____ Position _____
 (Number/Street/City/State/ZIP)

Address _____

Phone (_____) _____ Employment Dates: From _____ To _____

Name and Title of Immediate Supervisor _____

Description of Duties _____

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Reason for Leaving _____ Salary _____ Per _____

Name of Employer _____ Position _____

Address _____
(Number/Street/City/State/ZIP)

Phone (_____) _____ Employment Dates: From _____ To _____

Name and Title of Immediate Supervisor _____

Description of Duties _____

Reason for Leaving _____ Salary _____ Per _____

Name of Employer _____ Position _____

Address _____
(Number/Street/City/State/ZIP)

Phone (_____) _____ Employment Dates: From _____ To _____

Name and Title of Immediate Supervisor _____

Description of Duties _____

Reason for Leaving _____ Salary _____ Per _____

Certifications & Training

Please check those certifications that you will have before June 18, 2012. Copies of certification will need to be provided to Girl Scouts of Oregon & Southwest Washington prior to starting employment

by June 18	Certification	Expiration Date/Training Date	Certifying Agency/State
	First Aid - Mandatory		
	Adult/Child CPR - Mandatory		
	Lifeguarding		
	Small Craft Safety Craft:		
	Challenge Course Practioner <input type="checkbox"/> Level 1 <input type="checkbox"/> Level 2		
	Belay Training		
	CHA		
	Archery Instructor		
	Wilderness First Aid		
	WFR/WEMT/EMT		
	Valid Driver's License		
	Food Handler's Permit		
	Other:		
	Other:		

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Camp Experience (Attach additional sheets if necessary.)

Camp	Location	Camper or Staff Position	Dates	Director (if staff)

Camp Skills Inventory (Place a check mark in the column that best describes your abilities for each of the following.)

Skill	Can Teach	Comfortable Doing	Some Experience	Would Like to Learn	None
Girl Scout Program	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Leadership Development	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Songs / Song Leading	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Games	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Crafts	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Dramatics	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Nature Activities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Archery	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Swimming / Water Safety	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Canoe / Kayak / Rowboats	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fire Building	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Outdoor Cooking	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Knife, Hatchet, Axe Safety	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Knots / Lashing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Compass / Orienteering	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Leave No Trace	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Trip Planning	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Backpacking / Hiking	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Horseback Riding	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Additional Information (Attach additional sheets if necessary)

1. Will you be 18 years old by June 20, 2012? Yes No
2. Will you be 21 years old by June 20, 2012? Yes No
3. Camp Director Applicants - Will you be 25 by June 12 2012? Yes No
4. Which age group(s) do you have experience working with? If more than one group, please number "1" being the most experience up to "4" for less experience. Leave blank any age group you have no experience working with.
 7-8 _____ 9-11 _____ 12-14 _____ 15-17 _____

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5. Describe your experience working with the age group(s) checked above. Which are you most comfortable with?

6. What skills or experience do you offer as a staff member in the position(s) you have applied for?

7. Why do you want to work at this camp? (Please answer separately for each property you are interested in.)

8. What do you think children should get from their experience at camp?

9. What do you feel makes a good role model for children?

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9. Write a letter to a parent of a child attending camp explaining what you want their child to get out of the camp experience.

10. Do you know any reason you would not be able to perform the essential job position for which you are applying, with or without reasonable accommodation?

Yes No, If yes, please describe

11. Have you been convicted of a crime (other than a traffic violation)? Yes No

If yes, please state offense, date and location (a conviction will not necessarily be cause for disqualification).

References

Please list 3 persons, not related to you, who can judge your qualifications for the position(s) for which you are applying. Mail the enclosed reference forms to those listed below. Ask references to return forms directly to Girl Scouts of Oregon & Southwest Washington using the information on the form.

Name	Profession/Relationship to Applicant	Email/Telephone

I hereby authorize you to check all my educational references and the personal and 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 Present employer only after accepting position Previous employers References listed

I certify that my answers to the preceding questions are true and complete. If any information submitted is found to be false, it may be cause for dismissal. I understand that I am subject to a criminal background check. An Internet check, including social networking sites, will be conducted for content regarding myself. Any content deemed inappropriate for working with children may result in the termination of my candidacy or employment. If selected as a staff member, I agree to abide by the philosophies as stated in the Girl Scout Promise and Law and to fulfill the responsibilities of the position to the best of my abilities. I understand that Girl Scouts of Oregon and Southwest Washington is an "at will" employer. Girl Scouts of Oregon and Southwest Washington is an equal opportunity employer.

Signature _____ Date _____

Return completed application to: Girl Scouts of Oregon & Southwest Washington

Attn: Marissa Bennett

9620 SW Barbur Blvd. Portland OR 97219

Fax 503-977-6801 / Email: mbennett@girlscoutsw.org