VACATION BIBLE SCHOOL/DAY CAMP YOUTH COUNSELOR APPLICATION

Application Name		Age	Entering Grade _	Gender
 Parent/Guardian's Name				
Parent/Guardian's Address				
Phone No: Home	Cell:	Work:		Email:
Emergency Contact Informati	ion Name			
Relationship	Contact I	nfo		·
Previous Counselor or Other	Experience Working with C	hildren		
Skills/Talents and Hol				
Preferred Work Hours 7 preference	':45am - 3:15 pm 10:4	15 am - 6:15 pm _.	Other (speci	fy) No
Medical Information Name o		Telephone No.		
ID#	_			
Do you have a medical condit condition(s) and limitations _			_ :	es, list medical
Allergies				
In the event of a medical eme However, we reserve the righ DISTRIBUTED BY VBS STAFF. I Camp. I have read and under	nt to seek immediate medion hereby apply for a position	cal attention. NOn as a Counselor	MEDICATION WI	LL BE
Signature		Date:		
Darent's Signature		Date		

Use of Pictures I agree/do not agree (circle one) that pictures tak Peoples Church website and/or in the Peoples Church Prodder.	en of my child may be used on the			
Signature	Date			
YOUTH COUNSELOR GUID	ELINES			
agree to the following terms and conditions, if I am lected for the position of Counselor for the Vacation Bible School Camp:				
1. A counselor is a position of trust and responsibility. I promise to conduct myself in an appropriate manner while in this position.				
2. I agree to conduct myself in a manner that sets an example for the younger children in my care. I will treat them with respect. I will be attentive to their needs. I will not engage in horseplay with them, nor will I touch them in an inappropriate manner. Corporal punishment is strictly prohibited. I will use appropriate language when speaking to them.				
3. I will be responsive and respectful to the adults in the Vacation Bible School. I will promptly carry out any assignments given to me.				
4. I will arrive on time for the beginning of my shift. I will be ready for work as I walk through the doors. I will return from lunch and other breaks on time.				
5. I will avoid unnecessary distractions while on the job. I will turn off my cell phone, iPod, and other electronics when I am on the job. I will only use these items when I am on break.				
6. I will treat my fellow counselors with respect. I will use approp	riate language at all times.			
7. I understand that the use of alcohol, drugs, cigarettes, etc. is s	trictly prohibited.			
Applicant NameD	ate			
ParentI	Date			