Armenian General Benevolent Union Camp Nubar Staff Application

Please PRINT neatly in ink.

Accurate but brief answers are essential. Lack of camp experience is no obstacle.
No one is denied admission, camper or counselor, because of race, color or national origin.
Please answer all questions completely.

Year 2018

1. **Last Name: _____ First Name: _____ Male ____ Female ____**

2. **Applying for: Counselor in Training (16) ____ Junior Counselor (17) ____ Senior Counselor (18+) ____**
   Head staff/other (write-in) _____

3. **Date of Birth (Month/Day/Year): ____/____/_____ Age by July 1st: _____ Grade completed by July 1st: _____**
   Are you a US Citizen? Yes ____ No ____ Social Security #: _____
   Driver's License #: _____ T-Shirt Size (circle one): S M L XL XXL

4. **Home Address: _____ City: _____ State: ____ Zip: _____ Country: _____**

5. **Contact Information**
   Email: _____ Cell Phone: (____)_____ Home Phone: (____)_____

6. **Primary Language: _____ Secondary Languages: _____**
   Do you play a musical instrument? If so, what? _____
   Extra-Curricular (clubs, varsity sports, cultural, etc): _____

7. **Education**
   High School: _____ Graduation Date (or expected): _____
   College: _____ Graduation Date (or expected): _____ Major: _____
   College: _____ Graduation Date (or expected): _____ Major: _____

8. **Employment History**
   Employer: _____ Position: _____ Supervisor Name/#: _____
   Employer: _____ Position: _____ Supervisor Name/#: _____
   Employer: _____ Position: _____ Supervisor Name/#: _____

9. **Do you hold American Red Cross Certification in: <u>Please give expiration date & attach copy of all current certificates</u>.**
   Advanced Life Saving _____ Life Guard Training _____ Water Safety Instructor _____ CPR _____
   Basic First Aid _____ Responding to Emergency _____ E.M.T. _____ Small Crafts _____

10. **What camps have you attended?**
    Camp Name: _____ Years: _____ Camper/Staff Positions: _____
    Camp Name: _____ Years: _____ Camper/Staff Positions: _____

11. **Place check marks in the spaces of <u>ALL</u> age groups you would work well with.**
    ___ Ages 7-9 ___ Ages 10-11 ___ Ages 12-13 ___ Ages 14-15

AGBU CAMP NUBAR, 55 E 59th Street, New York, NY 10022
Fax: 866.854.8074 Phone: 212.319.6383 Email: campnubar@campnubar.org

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12. Additional Information

Any special conditions which will enter into your accepting employment at Camp Nubar?

_____

Any obligations that may require time away from Camp? Please indicate dates.

_____

Describe any specialized training in camping or education pertinent to this position.

_____

13. Activity Checklist

Place a "1" in the space for all activities you are capable of ASSISTING/SUPERVISING.
Place a "2" in the space for all activities you are capable of LEADING/TEACHING.

ARMENIAN
___ Cooking
___ Culture
___ Dance
___ History
___ Language

ARTS & CRAFTS
___ Crafts
___ Drawing
___ Painting

CERAMICS
___ Kick wheel
___ Kiln
___ Sculpture

PERFORMING ARTS
___ Acting/Drama
___ Costumes
___ Dance
___ Music
___ Writing

PHOTOGRAPHY
___ Developing Film
___ Taking Photos
___ Photo Projects
___ Digital Photography
___ Video Editing/Slideshows
___ Social Media

CAMP-CRAFTS/OUTDOORS
___ Archery
___ Campfire Building
___ Fishing
___ Hiking
___ Outdoor Cooking
___ Overnight Camping
___ Shelter Building
___ Survival Training

HORSE BACK RIDING
___ Grooming
___ Riding
___ Stable Management
___ Tacking
___ English
___ Western

SPORTS/ATHLETICS
___ Baseball/Softball
___ Basketball
___ Football
___ Hockey
___ Soccer
___ Training/Conditioning
___ Tennis
___ Volleyball

WATERFRONT
___ Canoeing
___ Lifeguard Training
___ Rowing
___ Sailing
___ Swimming
___ Water Skiing

14. Other Skills

Place a check mark in the space if you are capable of contributing in that specific area.

___ Blogging/Writing
___ Camp Newsletter
___ IT/Computer Skills (advanced)
___ Office Management
Other _____

15. Application Checklist. Please make sure the following is enclosed with your application:

___ Personal Statement
___ 2 Recommendations
___ Criminal Conviction Form
___ Copies of any Certifications
___ Recent Photograph
___ Resume

By signing below, I warrant that the information in this application is true.

Signature: _____ **Date:** _____

Please submit all application materials and recommendations via post, fax, or email:

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Personal Statement

You may handwrite below, or type on separate sheet if you wish.

Year 2018

For ALL First-time Applicants: Provide a biographical sketch. Include any training and/or experience if applying for a specialty activity. Why do you want to be a counselor at Camp Nubar?

For Returning Junior Counselors: Summarize your experience as a CIT. Highlight **one** specific challenge or surprise you encountered and how you learned from it. Describe any experience(s) you have had this past year that will change how you approach your job this summer.

For Returning Senior Counselors: See Junior Counselor description. In addition, how do you see your role at camp changing this summer compared to the previous summer? How will you use your job this summer to accomplish any personal development goals (goals do not have to be camp related)?

Name of Applicant: _____

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American Camp Association ACCREDITED

Personal Statement (continued)

You may handwrite below, or type on separate sheet if you wish.

Year 2018

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Armenian General Benevolent Union Camp Nubar Staff Application

American Camp Association ACCREDITED

Recommendation Form

You may handwrite below, or type on separate sheet if you wish.

Year 2018

_____ is applying for a staff position at AGBU Camp Nubar for the summer season. Please indicate your relationship with the applicant and describe why you believe he/she would be an appropriate candidate for a summer camp staff position.

_____

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Name of Reference: _____

Relationship to Applicant: _____

Telephone Number: _____

As this recommendation will remain confidential, kindly submit it via mail, email or fax to:

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Fax: 866.854.8074 Phone: 212.319.6383 Email: campnubar@campnubar.org

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Recommendation Form

american camp association ACCREDITED

Year 2018

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Name of Reference: _____

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Telephone Number: _____

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Prospective Children's Camp Staff Member
Certified Statement Relative to Conviction of a Crime
or Existence of a Pending Criminal Action

Last Name: _____ **First Name:** _____

Date of Birth (Month/Day/Year): ____/____/_____ **Social Security #:** _____

Home Address: _____ **City:** _____ **State:** ____ **Zip:** _____ **Country:** _____

Have you ever been convicted of a crime, misdemeanor or felony, OR do you presently have a criminal action pending against you? ___ Yes ___ No

If Yes, for each such conviction or pending action, provide the following information:

1. **The date of the incident which resulted in the criminal conviction or charge:** _____
2. **The date of conviction or charge:** _____
3. **The crime you were convicted of or are presently charged with:**

   _____

   _____

4. **The nature of the incident which resulted in the criminal conviction or charge:**

   _____

   _____

5. **The City, County and State you were convicted in or are presently charged in:**

   _____

6. **The name of the court you were convicted in or are presently charged in:**

   _____

7. **The penalties imposed as a result of the conviction (i.e. fine, jail term, restitution, etc.):**

   _____

8. **For each of the penalties imposed, list on the reverse or a separate sheet of paper, the date the penalty was complied with (i.e. date fine or restitution was paid in full, date jail term was completed, etc.)**

I, _____ **certify under penalty of perjury that the above information is complete and accurate.**
(Print Full Name)

By my signature below, I hereby authorize AGBU or its appointed representative to conduct a criminal background check of my records in all jurisdictions of the United States or any foreign country.

Signature: _____ **Date:** _____