



FOR YOUTH DEVELOPMENT®
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

Tri-County YMCA Summer Day Camp Employment Application

Brief Description:

The Tri-County YMCA is seeking Camp Counselors who will provide direct supervision of a group of children in a seasonal day camp setting. The Camp Counselors will provide a quality experience to children and parents focused on the YMCA Core Values: caring, honesty, respect, responsibility, and faith. Candidates must be enthusiastic, responsible, enjoy working with children, and have a passion for the YMCA and its mission. Over the summer, you will have the opportunity to positively impact the lives of the kids you work with and develop amazing friendships that will last a lifetime.

Qualifications:

Candidates must be 18 years of age and have a strong desire and ability to work with children. Candidates should have the ability to accept supervision and guidance from camp supervisors and provide strong customer service to parents at all times. Candidates will need to display the ability to assist in the direction, planning, teaching, coordinating, and carrying out of activities and programs that are theme and developmentally appropriated while guiding campers in their own personal growth. Counselors are provided with a theme for each week of the summer and are responsible for planning the games, arts/crafts, group activities, etc. that the kids will participate in on a daily basis. The staff share their ideas and work together to finalize their activities during the weekly staff meetings. Candidates must display good character, integrity, adaptability, enthusiasm, sense of humor, patience, and self-control. Punctuality and flexibility are key to this position along with the ability to work in a fast paced, highly flexible, and rapidly changing work environment. Counselors are required to attend the camp trainings prior to the start of camp and the weekly staff meetings throughout the summer.

Camp Information:

Camp Locations:	Ferdinand, Jasper, and Tell City
Dates:	Tuesday, May 31 st to Tuesday, August 5 th
Hours:	Ferdinand: 6:00 a.m. to 6:00 p.m. Jasper: 6:30 a.m. – 6:00 p.m. Tell City: 6:30 a.m. – 6:00 p.m. (Shifts vary with staff working about 30-35 hours a week)
Days:	Staff must be available to work Monday through Friday
Status:	Part-time/Seasonal/Non-Exempt
Reports to:	Assistant Site Supervisor/Site Supervisor/Director of Youth Development

Submit Application to:

Tri-County YMCA
Christine Kleaving
131 E. 16th Street
Ferdinand, IN 47532

Contact Christine with any questions:

Phone: 812-367-2323

Email: christine@tricountymca.org

Applicant Information:

First Name M.I. Last Name Today's Date

Street Address

City State Zip Code

Email Address

Cell Phone Number

Education:

High School: _____

Year of Graduation: High School: _____ College: _____

College(s): _____ Major: _____

College(s): _____ Major: _____

Other Specialized Training: _____

Personal References:

Please list references who are not related to you and who are not previous employers:

1. Name: _____ Length of Association: _____

Email Address: _____ Phone #: _____

2. Name: _____ Length of Association: _____

Email Address: _____ Phone #: _____

3. Name: _____ Length of Association: _____

Email Address: _____ Phone #: _____

Employment History:

Starting with your present or last job, list the names of all employers.

Company Name:	Dates Employed: From: _____ To: _____	Telephone Number: Email:
Address:	City/State:	Hourly Rate/Salary:
Job Title:	Work Performed:	Supervisor's Name:

Reason for Leaving: _____

Company Name:	Dates Employed: From: _____ To: _____	Telephone Number: Email:
Address:	City/State:	Hourly Rate/Salary:
Job Title:	Work Performed:	Supervisor's Name:

Reason for Leaving: _____

Company Name:	Dates Employed: From: _____ To: _____	Telephone Number: Email:
Address:	City/State:	Hourly Rate/Salary:
Job Title:	Work Performed:	Supervisor's Name:

Reason for Leaving: _____

Agreement: I certify that the information on this application is true, complete, and correct. I hereby authorize the investigation of my past employment, education, and activities. I release from all liability all persons, companies, and corporations supplying information. I understand that false answers or statements or significant omissions made by me on this form shall be sufficient cause for denial of employment or discharge.

Applicant Signature: _____

Date: _____