



## BETHEL HORIZONS OUTDOOR MINISTRIES APPLICATION

Name \_\_\_\_\_ Date \_\_\_\_\_ SS # \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Birthdate \_\_\_\_/\_\_\_\_/19\_\_\_\_ Male \_\_\_\_\_ Female \_\_\_\_\_ As of June 1, I will be: Under 18 \_\_\_\_ At least 18 \_\_\_\_ At least 21 \_\_\_\_

\* \_\_\_\_\_ Home Address \_\_\_\_\_ Phone Number \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

City/State \_\_\_\_\_ Zip \_\_\_\_\_ E-mail \_\_\_\_\_

\* \_\_\_\_\_ School Address \_\_\_\_\_ Cell Phone \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

City/State \_\_\_\_\_ Zip \_\_\_\_\_ E-mail \_\_\_\_\_

\*Place an "X" before the address at which you can be most easily reached.

Home Congregation \_\_\_\_\_ City/State \_\_\_\_\_

### EDUCATION AND MILITARY DUTY:

Current School/ Schools Attended	Grade/College Level	Years Attended	Major Degrees Received

Have you served in the military? \_\_\_\_\_ What Branch? \_\_\_\_\_ Dates of Service \_\_\_\_\_

What was your rank at discharge? \_\_\_\_\_ Are you currently in the Reserves? \_\_\_\_\_

### EMPLOYMENT HISTORY (list your last two jobs):

Employer \_\_\_\_\_ Phone Number \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Address \_\_\_\_\_ City/State \_\_\_\_\_ Zip \_\_\_\_\_

Supervisor Name \_\_\_\_\_ Phone Number \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Job Title \_\_\_\_\_ Dates Employed \_\_\_\_\_

Responsibilities \_\_\_\_\_

Employer \_\_\_\_\_ Phone Number \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Address \_\_\_\_\_ City/State \_\_\_\_\_ Zip \_\_\_\_\_

Supervisor Name \_\_\_\_\_ Phone Number \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Job Title \_\_\_\_\_ Dates Employed \_\_\_\_\_

Responsibilities \_\_\_\_\_

**REFERENCES**

Name the two individuals who are filling out the Reference Form at the end of this application. References may include clergy, current work supervisor or instructor, or someone that has known you at least 3 years. No relatives, roommates, or classmates, please.

Name	Address	Phone Number	Relationship

**PREVIOUS CAMP EMPLOYMENT:**

Camp	Position(s)	Dates of Employment

**BACKGROUND INFORMATION:**

Have you ever been convicted of a felony? Yes \_\_\_\_\_ No \_\_\_\_\_

Is there any circumstance in your background which would call into question you being entrusted with the supervision, care, or guidance of youth? Yes \_\_\_\_\_ No \_\_\_\_\_

Have you ever been accused of sexual misconduct or abuse? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, to any of the above, please explain: \_\_\_\_\_

Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status? Yes \_\_\_\_\_ No \_\_\_\_\_

**CAMP POSITIONS:**

What positions do you wish to apply for? Rank the positions in order of preference. (Begin with "1" as your top preference)

- \_\_\_\_\_ Camp Counselor                      \_\_\_\_\_ Lifeguard                      \_\_\_\_\_ Guitarist/Musician
- \_\_\_\_\_ Cook                                      \_\_\_\_\_ First Aid Coordinator/Nurse                      \_\_\_\_\_ Trails Coordinator
- \_\_\_\_\_ In-Camp Assistance (Maintenance)                      \_\_\_\_\_ Artist
- \_\_\_\_\_ Retreat Center Coordinator                      \_\_\_\_\_ Naturalist

**CERTIFICATIONS:**

Do you hold any of the following certificates?

- American Red Cross Adult CPR with First Aid                      Yes \_\_\_\_\_                      No \_\_\_\_\_
- American Red Cross Community CPR                      Yes \_\_\_\_\_                      No \_\_\_\_\_
- American Red Cross Community First Aid & Safety                      Yes \_\_\_\_\_                      No \_\_\_\_\_
- American Red Cross Lifeguard Training                      Yes \_\_\_\_\_                      No \_\_\_\_\_
- American Red Cross CPR for the Professional Rescuer                      Yes \_\_\_\_\_                      No \_\_\_\_\_

Do you currently hold any instructor level certificates such as Water Safety Instructor, Lifeguard Instructor, or Boating Instructor? If so, please list type and dates of expiration:

\_\_\_\_\_  
\_\_\_\_\_

**FIRST AID COORDINATOR/NURSE:**

If applying for position of First Aid Coordinator/Nurse please answer the following questions:

Are you an: RN \_\_\_\_\_ EMT \_\_\_\_\_ American Red Cross Emergency Responder \_\_\_\_\_

What states are you registered to work in? \_\_\_\_\_ Other certificates that might qualify you for this position:

**CAMP SKILLS AND INTERESTS:**

Please check those areas in which you feel you could provide some leadership to youth campers.

Place a "1" by skills in which you hold certification.

Place a "2" by skills that you know well enough to teach others.

Place a "3" by skills that you could do with a group.

Place a "4" by skills that you are interested in.

- |                     |                      |                    |                      |
|---------------------|----------------------|--------------------|----------------------|
| ___ Bible Study     | ___ Challenge Course | ___ Story Telling  | ___ Canoeing         |
| ___ Guitar          | ___ Ropes Course     | ___ Athletics      | ___ Arts & Crafts    |
| ___ Maintenance     | ___ Indoor Games     | ___ Acting & Drama | ___ Environmental Ed |
| ___ Outdoor Cooking | ___ Singing          | ___ Biking         | Other Interests:     |
| ___ Astronomy       | ___ Song Leading     | ___ Swimming       | _____                |

Do you play any instruments? If so, what?

Are you bilingual? If so, what other languages?

What special hobbies can you share at camp?

What groups have you belonged to, or do you presently belong to? Note any leadership positions held.

What special contributions can you make at Bethel Horizons?

**ESSAY RESPONSES** (Please use a separate sheet of paper or type and attach to application):

1. Why do you want to work at camp this summer?
2. How do you feel you can best express your Christian faith at Bethel Horizons?
3. What goals do you have for yourself this summer?
4. What kind of experience should young people encounter at camp?
5. What strengths and weaknesses do you bring with you to this camping community?

**RETURNING STAFF ESSAY RESPONSES** (Please use a separate sheet of paper or type and attach to application):

1. Why do you want to work at camp again this summer?
2. How do you feel you can best express your Christian faith at Bethel Horizons?
3. How have you grown since you last worked at Bethel Horizons?
4. What is the most important thing you learned while working at Bethel Horizons?
5. What goals do you have for yourself this summer?

Are there any reasons you may have difficulty in performing any of the essential elements of the job for which you have applied (i.e. lifting restrictions or health conditions)? Yes \_\_\_\_\_ No \_\_\_\_\_

If Yes, please explain. \_\_\_\_\_

Are you willing to work both in and out of camp on various programs as needed? Yes \_\_\_\_\_ No \_\_\_\_\_

Where did you receive this application? Church \_\_\_\_\_ Online \_\_\_\_\_ Recruiting fair \_\_\_\_\_ What school? \_\_\_\_\_

What date are you be available to work? \_\_\_\_\_

Are there any dates, times, or commitments which you are unavailable? \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

**\*\*Please include a facial **photo** of yourself with this application *and* email to [bhorizons@bethel-madison.org](mailto:bhorizons@bethel-madison.org)\*\***

We consider applicants for all positions without regard to race, color, sex, national origin, age, marital or veteran status, the presence of a non job-related medical condition or handicap, or any other legally protected status.

**PLEASE RETURN APPLICATION TO:**

Bethel Horizons  
312 Wisconsin Avenue  
Madison, WI 53703

Phone: 608.257.3577  
Fax: 608.257.4044  
Email: [bhorizons@bethel-madison.org](mailto:bhorizons@bethel-madison.org)  
[www.bethelhorizons.org](http://www.bethelhorizons.org)



# BETHEL HORIZONS REFERENCE FORM

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Madison, WI 53703  
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Email: bhorizons@bethel-madison.org  
www.bethelhorizons.org

## APPLICANT INFORMATION

(Please complete this section before giving to your reference with an addressed and stamped envelope)

Applicant's Name \_\_\_\_\_

Phone \_\_\_\_ - \_\_\_\_ - \_\_\_\_\_ E-mail \_\_\_\_\_ Position applied for \_\_\_\_\_

## REFERENCE INFORMATION

Reference Name \_\_\_\_\_ Phone Number \_\_\_\_ - \_\_\_\_ - \_\_\_\_\_

Reference Position or Title \_\_\_\_\_ E-mail \_\_\_\_\_

How long have you known this person? \_\_\_\_\_ In what capacity? \_\_\_\_\_

**PLEASE RATE** (1-unacceptable, 2-needs improvement, 3-average, 4-good, 5-outstanding, n/a-not applicable):

Dependability	1	2	3	4	5	n/a
Personal integrity and honesty	1	2	3	4	5	n/a
Enthusiasm	1	2	3	4	5	n/a
Emotional maturity	1	2	3	4	5	n/a
Spiritual maturity	1	2	3	4	5	n/a
Relationship with peers	1	2	3	4	5	n/a
Relationship with authority figures	1	2	3	4	5	n/a

## ADDITIONAL QUESTIONS (Please feel free to use the back of this page or attach an additional page)

Describe how the applicant works with others \_\_\_\_\_

Describe the personality of the applicant \_\_\_\_\_

Describe the leadership ability of the applicant \_\_\_\_\_

Would you be willing to have your child in the applicant's care for a week? Yes \_\_\_\_\_ No \_\_\_\_\_ Additional Comments \_\_\_\_\_

Thank you for your assistance and insights. If you have any questions or wish to make further comments, please feel free to contact Lindsey Scheid, Program Director at lindsey@bethelhorizons.org or 608.574.3993

Signature \_\_\_\_\_ Date \_\_\_\_\_



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