



YMCA Day Camp Norwich Job Application



YMCA Camp Norwich is interested in hiring the finest men and women to be teachers/friends and positive role models in the development of young people. If you are interested in becoming a member of our dedicated staff please complete this application.

We are an Equal Opportunity Employer. Applicants for all job openings are welcome and will be considered without regard to race, color, religion, national origin, sex, age, sexual orientation, physical or mental disability, ancestry, genetic information, military status, or any other basis protected by state, federal or local law. It is the intent of the YMCA to comply with all applicable federal, state and local legislation concerning equal opportunity in employment.

PLEASE FILL OUT COMPLETELY.

Name: _____ Last: _____ First: _____ Middle Initial: _____

Current Mailing Address until (mm/dd/yy) _____

Are you over 18? YES NO
If Under 18, please list age ____
(You must provide us with a work permit)

Address: _____
City: _____ State/Zip: _____
Cell Phone: _____ (H) Phone: _____
Referred by: _____ E-mail: _____

Permanent Address (if different than above)

Address: _____ E-Mail: _____
City/State/Zip: _____ Phone: _____

For what position are you applying? _____

What group related activities have you been involved in?

1. _____
2. _____
3. _____
4. _____

EDUCATION: Include present year listing most recent experiences first.

School	Major	Present Year/Degrees Earned
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____

CAMPER AGE GROUPS:

Please NUMBER in order of preference (1-3) the age groups you are most comfortable working with:

_____ Explorers (K-2) _____ Adventurers (3rd-6th) _____ Trailblazers (7th-9th)



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CAMP/WORK EXPERIENCE (as employee): List most recent employment first. You may include in such history any verified work performed on a volunteer basis. Must have complete information to process application. Please include leadership development programs (i.e. CIT or LIT programs).

1. **Camp or Firm** **Position** **Supervisor** **Length of Time**

City: _____ State: _____ Phone: _____

2. **Camp or Firm** **Position** **Supervisor** **Length of Time**

City: _____ State: _____ Phone: _____

3. **Camp or Firm** **Position** **Supervisor** **Length of Time**

City: _____ State: _____ Phone: _____

It is unlawful in Massachusetts to require or administer a lie detector test as a condition of employment or continued employment. An employer who violates this law shall be subject to criminal penalties and civil liability.

CHARACTER REFERENCES: (Four) Please include one relative, and do not list friends or those listed above. Must have complete information to process application.

1. **Name:** _____ **Relationship to you:** _____

City: _____ State/Zip: _____ Phone: _____

2. **Name:** _____ **Relationship to you:** _____

City: _____ State/Zip: _____ Phone: _____

3. **Name:** _____ **Relationship to you:** _____

City: _____ State/Zip: _____ Phone: _____

4. **Name:** _____ **Relationship to you:** _____

City: _____ State/Zip: _____ Phone: _____

HAIKU: Please compose an original haiku about yourself. Supplement with drawings as desired.



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EXPERTISE: Using the list below, place a 'T' before those activities you can organize and teach as a specialist. Place an 'A' before those activities that you can assist in teaching. Place a 'P' before those activities in which you have participated and have some knowledge or skill. (Please be very certain of your experience and skill level before placing a 'T' or an 'A' in front of an activity.)

Athletics

- _____ Archery
- _____ Basketball
- _____ Volleyball
- _____ Football
- _____ New Games
- _____ Softball
- _____ Soccer
- _____ Gymnastics
- _____ Tennis
- _____ Track
- _____ Other

Arts & Crafts

- _____ Basketry
- _____ Candle making
- _____ Painting
- _____ Ceramics
- _____ Woodworking
- _____ Sketching
- _____ Photography
- _____ Beads
- _____ Other

Water Activities

- _____ Swimming Lessons
- _____ Kayaking
- _____ Canoeing
- _____ Snorkeling
- _____ Fishing
- _____ Sail boarding
- _____ Other

Outdoor Living Skills

- _____ Backpacking
- _____ Fire Building
- _____ Tent Pitching
- _____ Camping Out
- _____ Outdoor Cooking
- _____ Orienteering
- _____ Lashing
- _____ Shelter Building
- _____ Edible Plants of MA
- _____ Other

Drama/Music

- _____ Creative Drama
- _____ Play Directing
- _____ Play Writing
- _____ Costumes/Scenery
- _____ Storytelling
- _____ Story Leading
- _____ Instruments you play?
- _____ Dance
- _____ Types of dance?
- _____ Choreography
- _____ Other

Adventure Skills

- _____ Climbing Tower
- _____ High Ropes
- _____ Low Ropes
- _____ Group Initiatives
- _____ Processing
- _____ Other

CURRENT CERTIFICATIONS: Please enclose photocopies with this application.

	<i>Expiration Date</i>		<i>Expiration Date</i>
_____ RN	_____	_____ Community CPR	_____
_____ LPN	_____	_____ Child/Adult CPR	_____
_____ EMT	_____	_____ Water Safety Instructor	_____
_____ Medical First Responder	_____	_____ ARC Lifeguard Training	_____
_____ Responding to Emergencies	_____	_____ ARC Aquatic Instructor	_____
_____ ARC Standard First Aid	_____	_____ YMCA Swim Instructor	_____
_____ ARC Advanced First Aid	_____	_____ YMCA Lifeguard	_____
_____ Basic Life Support	_____	_____ Small Craft Instructor	_____
_____ Ropes Training	_____	_____ Other _____	_____
_____ Other _____	_____		



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QUESTIONNAIRE: Please use an **additional sheet** of paper to answer the following questions.

New Employees

1. Write a brief biographical sketch including camping experiences, responsibilities, and experience or training in other fields that might have a bearing on this application. We are especially interested in your experience with youth, camps and leadership positions you have held.
2. Why do you want to work at Camp Norwich?
3. Please explain why you feel you could be an effective role model in our camp community.
4. Describe an important mentor to you and how they influenced the person you are today?
5. What would you like to see your campers go away with from their camp experience?
6. What are your major reservations about working at Camp Norwich?
7. Is there any part of the staff training or camp season for which you would not be available?
8. What is your philosophy about the use of non-prescription drugs (including marijuana and alcohol), both for yourself and others? *The employer reserves the right to have employees tested for drug usage at any time.*

What would you expect in the way of salary? _____

Returning Employees

1. Reflecting on previous summers, in what areas do you feel you can improve in order to be a top-notch camp leader?
2. Since being a camp employee, what are some things you have done that you feel have left you in a position to improve in the areas you discussed in question 1?
3. How will you work effectively with the rest of the staff to create a positive staff community this summer?
4. What are your main reasons for wanting to return to work at Camp Norwich?
5. Is there any part of the staff training or camp season for which you would not be available?

Please send this 4-page application, copies or scans of certifications, and any additional questionnaire pages to:

Hampshire Regional YMCA
ATTN: Sovina Mansfield, HR Coordinator
286 Prospect St.
Northampton, MA 01060

or

email your application to Sovina.mansfield@hrymca.org.

We have provided reference release forms which allow references to tell us more information about you. Please send the reference forms provided to three (3) people. Choose one employer and two personal individuals (pastor, teacher, mentor, coach, etc.). You may send these forms to an employer or personal reference already listed earlier, or you may send these forms to additional references. Thank you.



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Applicant's Name _____ Position Applied For _____
First M.I. Last

Reference Name _____ Phone (____) _____
First Last

ALL OF THE FOLLOWING QUESTIONS/INFORMATION MUST BE COMPLETELY ANSWERED UNLESS OTHERWISE NOTED.

1. What is your relationship to this individual?

- Supervisor/Employer Friend or Neighbor Adult Co-Worker Teacher
- Family Member (specify relation) _____
- Other (specify) _____

2. How long have you known this individual? ___ years ___ months

If reference is (was) individual's supervisor:

Verify applicant's job title _____

Verify *supervisor's* job title _____ Company _____

Verify dates applicant worked: from ___/___/___ to ___/___/___

Reason for leaving _____

If not still employed, is applicant eligible for rehire? No / Yes

If no please explain: _____

Briefly verify duties applicant performed. (Agree with application? No / Yes)

3. How would you rate this individual's: (Please circle answers or enter responses in the space to the right.)

- | | |
|-----------------------------------|--------------------------------|
| Reliability/dependability | Excellent / Good / Fair / Poor |
| Ability to work with others | Excellent / Good / Fair / Poor |
| Productivity | Excellent / Good / Fair / Poor |
| Quality of work | Excellent / Good / Fair / Poor |
| Communication skills | Excellent / Good / Fair / Poor |
| Self-Motivated | Excellent / Good / Fair / Poor |
| Judgment in normal circumstances | Excellent / Good / Fair / Poor |
| Judgment under pressure or stress | Excellent / Good / Fair / Poor |

4. How would you describe this person's character?

5. How would you describe this person's ability to work effectively with others?

6. Can you give me an example of how this individual showed that he/she was responsible, followed the rules?

7. Please give me an example of a time when this individual excelled at working independently?



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8. What are this individual's strengths?

9. What are this individual's greatest needs for development and/or improvement?

10. Have you ever observed any problems or are you aware of significant complaints about this individual from other staff, parents, customers/members or others?

No / Yes If yes please explain: _____

11. Can you think of any reason why we shouldn't hire this person? (Please note: this person may be working directly with children).

No / Yes If yes please explain: _____

The following **MUST** be answered.

12. To the extent you know, please tell me about the applicant's roles with children; for example, coaching, youth organizations, schools, etc.

13. Please describe your observations of his/her ability to work with children (or teens):

14. In the time that you worked with or have known this person, did you ever observe anything that would cause you to be uncomfortable about recommending them for a position working with young people?

No / Yes If yes please explain: _____

15. Is there any reason this person should not work with children? No / Yes

If yes, please explain: _____

If you have other questions, comments or concerns about this applicant working with youth, please call or e-mail Greg.Baker@hrymca.org , 413-586-9533 x105

Official Use Only

Reference checked by (print) _____ Date ___ / ___ / ___

Signature _____

(must be signed by individual checking reference)



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| Quality of work | <input type="checkbox"/> Excellent / <input type="checkbox"/> Good / <input type="checkbox"/> Fair / <input type="checkbox"/> Poor |
| Communication skills | <input type="checkbox"/> Excellent / <input type="checkbox"/> Good / <input type="checkbox"/> Fair / <input type="checkbox"/> Poor |
| Self-Motivated | <input type="checkbox"/> Excellent / <input type="checkbox"/> Good / <input type="checkbox"/> Fair / <input type="checkbox"/> Poor |
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