



CAMP BALCONES SPRINGS

JUNIOR COUNSELOR APPLICATION SUMMER 2009



**Changing Lives for the Better through
Relationships, Spiritual Impact, and Fun.**

NAME _____ BIRTHDAY _____ SSN _____

PERMANENT ADDRESS _____

PHONE _____ CELL PHONE _____

EMAIL ADDRESS _____

UNIVERSITY YOU PLAN TO ATTEND _____

Please mark an "X" by the term you would be available to work.

1st Term **June 7-June 20**

2nd Term **June 21-July 11**

3rd Term **July 12-August 1**

4th Term **August 2-August 15**

Please Check the Top 3 areas of Camp you might have an interest assisting a counselor.

___ **HORSEBACK**

___ **FINE ARTS**

___ **WATERFRONT**

___ **ROPES**

___ **OUTDOORS**

___ **SPORTS**

___ **ADVENTURE**

PERSONAL INFORMATION

Have you completed your senior year in high school? Yes No

Have you been a member of the CBS Work Crew in previous summers? Yes No**

**If not, we require that each of our Jr. Counselors experience 1 term of Work Crew before their term as a Jr. Counselor.

All hired summer staff agree not to use alcohol or tobacco products during their contracted time of employment at Camp Balcones Springs. Would you be able to make such a commitment? Yes No

Do you have any physical impairments or restrictions? Yes No

How did you hear about Camp Balcones Springs?

SHORT ANSWER QUESTIONS

What contributions do you believe you will make at camp?

In what area(s) do you feel you need to improve upon?

How are you currently growing as a Leader?

Explain how you feel about your current relationship with Jesus Christ?

If a 12 year old camper came to you and said, "I don't understand all the talk about going to church, Jesus, and reading the Bible. My mom and dad are nice to other people. Our family only goes to church on Christmas and Easter, and they seem to be doing fine." How would you react?

Camp History

Have you ever been a camper or counselor? Yes No

Camp Name _____

Camp Location _____

Year(s) as camper _____

References

Please list 3 references (not family or peers) that have seen you lead or have seen you work with children.

NAME	ADDRESS	PHONE #	RELATIONSHIP

In Case of Emergency, Please Notify the Following:

Name _____ Relationship _____

Address _____

City, State, Zip Code _____

Telephone: Home _____ Business _____

I understand that as a CBS staff member, I will be asked to perform many different duties. I will help wherever needed as a servant of Christ. I will honor all camp guidelines even if I may not completely agree with them and will have full confidence in the decisions made by the Leaders of camp and back them up.

I authorize investigation of all statements herein and release Camp Balcones Springs and all others from liability in connection with the same. I understand that, if employed, I will be an at-will employee and that any agreement to the contrary must be in writing and signed by the director of the camp. I also understand that untrue, misleading, or omitted information herein may result in dismissal, regardless of the time of discovery by the camp.

In connection with my application for employment, I authorize Camp Balcones Springs to solicit information about my background check including, but not limited to, information as to my employment, education, consumer credit history, military service, driving record, criminal record and/or public records history. I authorize all persons who may have information relevant to this investigation to disclose said information. I release from liability all persons, companies, governmental or other agencies and corporations disclosing such information. I hereby further authorize that a photocopy of this authorization may be considered an original.

Signature: _____ Date: _____

All statements become part of any future employee personnel files. This application stands valid till August 1st of the summer applicant applies. If Camp Balcones Springs makes no decision regarding employment by August 1st, applicant should file another application if he/she still desires employment for following summer. Camp Balcones Springs does not discriminate on the basis of race, color, sex, or national origin.

Please Return Completed Application to:

Camp Balcones Springs
104 Balcones Springs Dr.
Marble Falls, TX 78654
(830)693-CAMP (2267)