

HOLIDAY LAKE 4-H EDUCATIONAL CENTER

Teen Apprentice Program Application

Deadline for Submission: May 1, 2010

NAME: _____ PHONE#: (____) _____

PERMANENT ADDRESS: _____

CITY _____ STATE _____ ZIP _____

e-mail address _____

Camp experience, whether as Teen Leader or camper:

Date	Camp Name	Address of camp	Camper or Teen

What is your expected date of graduation? _____

Will you be attending college in the Fall of 2010 _____? If so, where _____?

What experience or other training do you have that would be useful in your working at Holiday Lake 4-H Educational Center as a TAP?

REFERENCES: Give information on three people (not relatives) who have knowledge of your character, experience, and abilities.

Name	Address	Phone #

In the following list, place 1 for “expert”, 2 for “can assist”, 3 for “interested but not knowledgeable”, and 4 for “have no interest”.

<u>ARTS AND CRAFTS</u>	*****
Model rocketry	
Nature crafts	
<u>OUTDOOR LIVING SKILLS & ADVENTURE</u>	*****
Ropes course	
Camping	
Orienteering	
Rappelling	
Outdoor cooking	
<u>THEATRICAL ARTS</u>	*****
Impromptu	
Directing	
Skits	
Dancing	

<u>MUSIC</u>	*****
Song leading	
Systems set-up	
<u>NATURE</u>	*****
Water ecology	
Wildlife	
Astronomy	
Forestry	
Weather	
Entomology	
<u>SPORTS</u>	*****
Archery	
Softball	
Basketball	
Volleyball	

Fishing	
Ping Pong	
Riflery	
Tennis	
<u>WATERFRONT</u>	*****
Canoeing	
Swimming	
<u>MISCELLANEOUS</u>	*****
Campfire Programs	
Story telling	
<u>LIVESTOCK</u>	*****
pigs	
Cattle	
sheep	
poultry	

When would you be available to come to Holiday Lake 4-H Educational Center for an interview?

Why do you want to be involved in the TAP program?

Signature: _____

Date: _____

Please return to: Nate Mahanes, Program Director, Holiday Lake 4-H Educational Center, 1267 4-H Camp Road, Appomattox, VA 24522. If you have questions, please call (434) 248-5444

Holiday Lake 4-H Educational Center is dedicated to serve all people regardless of race, color, religion, sex, age, national origin, handicap, or political affiliation. An equal opportunity/affirmative action employer. Individuals with disabilities desiring accommodations in the application process should notify Nate Mahanes, Program Director at (434) 248-5444 during office hours of 8:00 am to 4:30 PM by the application deadline.

HOLIDAY LAKE 4-H EDUCATIONAL CENTER



SUMMER PROGRAM STAFF REFERENCE FORM



TO: _____ (Name of Reference)

FROM: Nate Mahanes, Program Director

SUBJECT: Holiday Lake 4H Center Summer Program Staff

_____ (Applicant's name) has applied for a position at Holiday Lake 4-H Educational Center as a summer staff member with the Virginia Cooperative Extension Service and has given your name as a reference. We would appreciate your prompt response to the questions below.

Please return this confidential reference directly to:

Nate Mahanes, Program Director
Holiday Lake 4-H Center
1267 4-H Camp Rd.
Appomattox, VA 24522

CONFIDENTIAL EMPLOYMENT INQUIRY

1. How long (years) have you known the applicant?
2. Has your knowledge of the applicant been obtained as an employer? _____ supervisor? _____ teacher? co-worker? _____ Other? _____ Please explain:
3. Does the applicant have good oral/written communication skills? Please explain:
4. What strengths does the applicant have that would make him/her a good potential for employment?
5. Are you aware of any criminal record or other information that might make the candidate unsuitable for work with young children? Yes ___ No ___ Comments:

Please check the term, which you think most accurately, describes the applicant:

	POOR	GOOD	VERY GOOD	EXCELLENT
PERSONALITY				
CHARACTER				
APPEARANCE				
RESPONSE TO SUPERVISION				
DEPENDABILITY				
LEADERSHIP				
INDUSTRIOUS				
TECHNICAL ABILITY				
COOPERATION				
ENTHUSIASM				
INITIATIVE				
JUDGMENT				
HONESTY				

If you were in a position to do so, would you employ this applicant? Yes: _____ No: _____

Please make any additional comments which would help us better determine the knowledge, attitude, and skills the applicant possesses:

Please return promptly.

Please Print Name _____ Signature _____

Address _____ Date _____

Telephone Number _____ Business or Profession _____

Voluntary Disclosure Statement
All Camp Staff **FM 16**

Developed and approved by the
American Camp Association

Holiday Lake 4-H Educational Center
1267 4-H Camp Road
Appomattox, VA 24522

Name _____ Birth date _____
Last First Middle

Home address _____
Street Address City State Zip

Social Security # _____ Other names by which known (e.g., maiden name) _____

Home phone _____ Business phone (if applicable) _____

Cell phone (optional) _____ E-mail address (optional) _____

School or College _____

Address _____
Street Address City State Zip

Driver's License # _____ State _____ Expiration Date _____

1. Previous residence(s) for last five years (include college and home residences):

City _____ State _____ Years _____

City _____ State _____ Years _____

City _____ State _____ Years _____

City _____ State _____ Years _____

(Continue on separate sheet, if necessary.)

2. Have you ever been convicted of any crime relating in any manner to children and/or your conduct with them?

Yes No If yes, please

explain: (Use a separate sheet, if necessary.)

3. Have you ever been convicted of any crime including, but not limited to, those listed below and/or any crime similar in any manner to those listed below? Yes No

- Indecent assault and battery on a child under fourteen
- Indecent assault and battery on a mentally retarded person
- Indecent assault and battery on a person who has obtained the age of fourteen
- Rape
- Rape of a child under sixteen with force
- Assault with intent to commit rape
- Kidnapping of a child under sixteen with intent to commit rape
- Distribution and trafficking of narcotics or other controlled substances
- Intent to commit any of the above crimes.

If yes, please explain: (Use a separate sheet, if necessary.)

4. Have you ever been adjudged liable for civil penalties or damages involving sexual or physical abuse of children? Yes No If yes, please explain: (Use a separate sheet, if necessary.)

5. Are you now or have you ever been subject to any court order involving sexual or physical abuse of a minor, including, but not limited to a domestic order or protection? Yes No

If yes, please explain: (Use a separate sheet, if necessary.)

6. Have your parental rights ever been terminated for reasons involving sexual or physical abuse of children? Yes No

If yes, please explain:

I understand that:

- a) The camp may deny employment to any person who answers "yes" to any one of questions 2-6. If hired and the employer later discovers circumstances that would indicate a "yes" answer to any of the above questions, employment may be terminated immediately.
- b) The information provided on this form is subject to verification, which may include a criminal history check and request from any Central Registry of child abusers.
- c) The camp may terminate employment or volunteer service of any person if that person is found, regardless of when discovered, to:
 - 1) have a history of complaints of abuse of a minor;
 - 2) have resigned, been terminated, or been asked to resign from a position whether paid or unpaid, due to complaint(s) of sexual abuse of a minor; and/or
 - 3) have falsified or omitted information in this disclosure statement.
- d) This disclosure statement must be updated yearly.

Signature _____ Date _____

Signature of Minor's Parent or Guardian _____ Date _____