



ST. JOHN BOSCO WILDERNESS CAMP

APPLICATION FOR EMPLOYMENT 2010

Please Print

Position Applied For: _____

mail to: **St. John Bosco Camp**
Box 3002, Saskatoon, Sk S7K 3S9
email: johnboscocamp@sasktel.net
phone: 306-978-0019

Name: _____ Social Insurance Number: _____

Gender: Male Female Are you less than 18 years of age? Yes No Birth Date (M/D/Y) _____

Present Address: _____ City: _____ Postal Code: _____

Permanent Address: _____ City: _____ Postal Code: _____

Phone: _____ Cell Phone: _____ Email: _____

Dates Available to Work:

Check One

Note: all dates are approximate at this time and will be verified upon hiring

Full / Part

School Visitations: (February to Mid May)

Spring Cleanup/Setup May 10 - May 16

Leadership Training – Spring May 17 - May 21

Spring Programs May 25 - June 23

Leadership - Senior Out-tripping June 25 - 30

Leadership Training – Summer June 30 – July 5

Summer Session:

1st Camp July 7 - 17

2nd Camp July 21 – 31

3rd Camp August 4 - 14

Please list any dates that you will not be available within the periods

checked above: _____

Are you willing to come to camp as a volunteer? Yes No

Would you be interested in taking a Flat Water Canoe Course Yes No

Wilderness First Aid Course Yes No

(Dates and costs to be determined based on demand and availability)

No use of drugs or alcohol is permitted at camp. Are you willing to abide by this policy? Yes No

Have you ever been convicted of a criminal or sexual offense? Yes No

If yes, explain: _____

Please provide us with a criminal record and vulnerable sector check.

Skill Certifications:

Do you have any of the following certifications?

	Yes	Level	Date of Certification
Wilderness First Aid	<input type="checkbox"/>	_____	_____
Standard First Aid	<input type="checkbox"/>	_____	_____
CPR	<input type="checkbox"/>	_____	_____
Bronze Cross	<input type="checkbox"/>	_____	_____
NLS	<input type="checkbox"/>	_____	_____
WSI Certification	<input type="checkbox"/>	_____	_____
Canoeing Certification	<input type="checkbox"/>	_____	_____
Kayaking Certification	<input type="checkbox"/>	_____	_____
Pleasure Craft Operator	<input type="checkbox"/>	_____	_____

Do you have a valid Driver's License? Yes No

Province: _____ Class: _____ PIC # _____

Indicate your level of proficiency in the following areas:

PROGRAM	KNOW NOTHING	KNOW SOMETHING	COULD HELP	COULD TEACH	CERTIFIED TO TEACH	CERTIFICATION LEVEL
Archery						
Backpacking / Hiking						
Campfire Programs						
Camping Skills						
Canoe Instructing						
Canoe Out-trips						
Drama						
Horsemanship						
Kayak Instruction						
Leading group games						
Leading Singing						
Lifeguard						
Liturgies / Discovery						
Meal Preparation / Food Safety						
Mountain Biking						
Nature Lore / Outdoor Ed						
Orienteering / Map & Compass						
Outdoor Cooking						
Overnight Campouts						
Playing an Instrument						
Ropes / Obstacle Course						
Sports – Bball, VBall, Soccer						
Survival Skills						
Swimming						
Swimming Instruction						
Wilderness Crafts						

Education: Grade Last Completed: _____ Post Secondary Years Completed: _____

Program/Major: _____ Length of Course: _____

Certificate/Diploma Received: Yes No Type of Recognition: _____

Other Courses, Certifications: _____

Are you returning to Post Secondary Education: Yes No

Describe any work-related skills, knowledge, experience or training related to the position being applied for:

Previous involvement with St. John Bosco Camp: _____

Previous involvement with other camps: _____

Summary of outdoor skills: _____

Favorite camp/camping activities or programs: _____

List any musical instruments you can play: _____

List any groups or organizations you belong to: State any positions you may have held.
(You do not have to list groups that would indicate religion, race, sex, etc.) _____

How do you feel you work with children? Mention any previous experience.

Name, Address and Phone Number of two of your last employers:

1) _____
Your Position: _____ Year: _____
Supervisor: _____ Phone Number: _____
2) _____
Your Position: _____ Year: _____
Supervisor: _____ Phone Number: _____

May we approach your previous
Employers as listed for a reference check?

Job #1 Yes No

Job #2 Yes No

List other references that can speak to your suitability for this type of work.

Name, full address, phone number and relationship to you (not relatives)

1] _____
2] _____
3] _____

Tell us something about yourself and why you choose to work at a Children's Summer Camp:

Please include resume and copy of current Swimming and First Aid or other relevant certifications.

I hereby declare that the information provided is true, accurate and complete to my knowledge.

Date: _____ Signature: _____