



# ST. JOHN BOSCO WILDERNESS CAMP

## APPLICATION FOR EMPLOYMENT 2012

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 7 - May 14

Leadership Training – Spring May 15 - May 18

Spring Programs May 22 - June 22

Leadership - Senior Out-tripping June 23 - 28

Leadership Training – Summer June 29 – July 2

Summer Session:

1st Camp July 4 - 14

2nd Camp July 18 – 28

3<sup>rd</sup> Camp August 1 - 11

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  \_\_\_\_\_

Standard First Aid  \_\_\_\_\_

CPR  \_\_\_\_\_

Bronze Cross  \_\_\_\_\_

NLS  \_\_\_\_\_

WSI Certification  \_\_\_\_\_

Canoeing Certification  \_\_\_\_\_

Kayaking Certification  \_\_\_\_\_

Pleasure Craft Operator  \_\_\_\_\_

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						
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: \_\_\_\_\_