



Camp Morice

Camp Morice Society
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email: campmorice@fsjames.com
www.campmorice.com

Returning
Supervisor

CAMP MORICE APPLICATION FOR EMPLOYMENT

Application deadline: April 1st 2008

Submit Application to Address Above

Thank you for your interest in Camp Morice!

Enclosed you will find the materials required to complete your application.

You can expect to receive a decision from the Camp sometime in late May. Please do not make nonrefundable travel arrangements until you have received a final acceptance decision. However, be prepared for a Training Workshop/Retreat at the beginning of the summer should you be hired.

Please be aware that you must be 16 years of age or older as of June 1st of the summer you are applying for to work at Camp Morice for a senior counsellor position.

Applicant Information

Full Name: _____ Date: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

_____ *City Province Postal Code*

Phone: () _____ E-mail Address: _____

Health Card Number: _____ Social Insurance Number: _____ Drivers License Number (if applicable): _____

Position Applied for:

| | | | |
|---|---------------------------------|--------------------------------|---|
| Do you hold a current Bronze Cross or NLS? (Please attach a photocopy) | YES <input type="checkbox"/> | NO <input type="checkbox"/> | What previous dates did you work at Camp Morice? _____ |
| Do you hold a current First Aid certification? (Please attach a photocopy) | YES <input type="checkbox"/> | NO <input type="checkbox"/> | |

Birth date (mm/dd/yyyy) _____

Education

High School: _____ City: _____

From: _____ To: _____ Did you graduate? YES NO If no, current Grade: _____

College or University: _____ City: _____

From: _____ To: _____ Did you graduate? YES NO If no, current year and degree program: _____

Previous Employment

Company _____ Phone () _____

Address _____ Supervisor _____

Job Title _____

Responsibilities _____

From _____ To _____ Reason for Leaving _____

May we contact your previous supervisor for a reference? Yes No

Company _____ Phone () _____

Address _____ Supervisor _____

Job Title _____

Responsibilities _____

From _____ To _____ Reason for Leaving _____

May we contact your previous supervisor for a reference? Yes No

Company _____ Phone () _____

Address _____ Supervisor _____

Job Title _____

Responsibilities _____

From _____ To _____ Reason for Leaving _____

May we contact your previous supervisor for a reference? Yes No

Disclaimer and Signature

I have considered the matter prayerfully and I am willing to be subject to the jurisdiction of Camp Morice for the summer of 2008. I understand that this applies to each camp and the days in between camps. I choose to cooperate fully and to maximize every opportunity for personal spiritual growth. I understand that applicants are selected on the basis of spiritual and character qualifications. I understand that anyone demonstrating a poor attitude or a poor quality of service is subject to dismissal. As a Camp Morice employee I will abstain from involvement in sexual immorality, the use of non-medical drugs, alcohol, tobacco, and occult activity. I agree to the Mission Statement of Camp Morice.

I will allow pictures of myself to be used for the purpose of promoting Camp Morice at the discretion of the camp.

I understand that my services are paid:

I accept the decision of Camp Morice to place me:

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Name (print) _____

Signature _____

Date _____

(Parent or Guardian must sign if applicant is under 18)

Parent or Guardian Name (print) _____

Signature of Parent or Guardian _____

Date _____

Camps I can work at:

- Kids Camp #1 July 13th to 18th
- Kids Camp #2 & #3 July 20th to 26th
- Youth Camp #1 August 10th to 16th
- Youth Camp #2 August 17th to 23rd