

Inspiration Hills – Summer Staff Re-Application

1242 280th Street

Inwood, Iowa 51240

(712) 986-5193 (866) 858-3265 FAX (712) 986-2301 E-Mail cal@inspirationhills.org

Directions: Fill out the application as completely and accurately as possible. Return it to Inspiration Hills ASAP to the address above. Give one enclosed reference sheet to each of your references, with the top 3 lines completed.

PERSONAL INFORMATION....

Today's Date _____

Last Name _____

First _____

Middle _____

Present Address - Until When _____?

Permanent Address _____

Ph. Num. _____

Ph. Num. _____

E-Mail address _____

E-Mail address _____

CHURCH

Name and city of the church that you are attending? List your church involvement (start with most recent).

WORK HISTORY (start with most recent)

Employer _____ Phone _____

Address _____ Dates Employed _____

Job Title _____ Supervisor _____

Reason for leaving _____

Work Performed _____

Employer _____ Phone _____

Address _____ Dates Employed _____

Job Title _____ Supervisor _____

Reason for leaving _____

Work Performed _____

Employer _____ Phone _____

Address _____ Dates Employed _____

Job Title _____ Supervisor _____

Reason for leaving _____

Work Performed _____

CAMP WORK EXPERIENCE

Dates	Camp	Position	Phone
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

EDUCATION

Name and Location of school _____ Circle year Completed by June

High School _____ 11 12

College _____ 1 2 3 4

Graduate School _____ 1 2 3 4

Subjects of special study _____

Career Goals _____

Please List any extra curricular activities you participated in, including the most recent;

REFERENCES (Name and full addresses) Exclude Relatives and Peers

Minister - Who knows you best	Professor, employer or supervisor
Name _____	Name _____
Address _____	Address _____
Phone _____	Phone _____

Character Ref. - Relationship?

Name _____

Address _____

Phone _____

You do not need reference sheets

SUMMER STAFF POSITIONS (Mark 1st & 2nd choices)

<input type="checkbox"/> Counselling Staff	<input type="checkbox"/> Lodge Camp Coordinator	<input type="checkbox"/> Wilderness Coordinator
<input type="checkbox"/> Nurse	<input type="checkbox"/> Day Camp Coordinator	<input type="checkbox"/> Videographer/Worship Leader
<input type="checkbox"/> CHIP's Co-coordinators Male <input type="checkbox"/> Female <input type="checkbox"/>		<input type="checkbox"/> Ropes Course Facilitator
<input type="checkbox"/> Family Camp Coordinator		

INFORMATION WE NEED TO KNOW....

Will you be age 18 or older by June? _____ Yes _____ No

Are you currently employed? _____ Yes _____ No

May we contact your current employer _____ Yes _____ No

Are you prevented from lawfully becoming employed in this country?
because of Visa or Immigration Status _____ Yes _____ No

Have you been convicted of a felony within the last 7 years? (A conviction
will not necessarily disqualify any application for employment.) If yes please explain _____ Yes _____ No

STATEMENT OF FAITH: Please answer the following questions on another sheet: 1) How has the Lord been working in your life since camp last year. 2) Indicate what motivated you to apply, and/or what your goals are for the summer.

Applicant's Statement

I certify that the answers given herein are true and complete to the best of my knowledge. I authorize investigation of all statements contained in this application for employment as well as any individual or organization listed on this application. In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand also, that I am required to abide by all rules and regulations of the employer.

Signature of Applicant

Date

INSPIRATION HILLS

BACKGROUND INVESTIGATION CONSENT

I, _____, hereby authorize Inspiration Hills and/or its agents to make an independent investigation of my background, references, character, past employment, education, credit history, criminal or police records, including those maintained by both public and private organizations and all public records for the purpose of confirming the information contained on my Application and/or obtaining other information which may be material to my qualifications for employment now and, if applicable, during the tenure of my employment with Company.

I release Company and/or its agents and any person or entity, which provides information pursuant to this authorization, from any and all liabilities, claims or law suits in regards to the information obtained from any and all of the above referenced sources used.

The following is my true and complete legal name and all information is true and correct to the best of my knowledge:

Full Name (Printed)

Maiden Name or Other Names Used

Present Address How Long?

City/State Zip?

Phone?

Former Address How Long?

City/State Zip?

*Date of Birth Social Security Number Driver's License Number State of License

Signature

Date

*NOTE: The above information is required for identification purposes only, and is in no manner used as qualifications for employment. Company is an Equal Opportunity Employer, and does not discriminate on the basis of Sex, Race, Religion, Age (40 and over), Handicap or National Origin.

Position applied for: _____