



Camp Wabanna

Changing the world one child at a time



Leader in Training Application

- The applicant is required to complete this form in its entirety without assistance.
- Please send recent picture with this form.
- This applies for our servant-leadership program.

SECTION A

Name: _____ Age: _____ Phone #: _____

Home Address: _____ City: _____ State: _____ Zip: _____

Email Address: _____ Cell phone #: _____

Date of Birth: _____ S.S.#: _____

Driver's License: Yes No State _____ License #: _____

Parents' Names: Mother: _____ Father: _____

You must respond to each of the following:

1. Educational History (and graduation date where applicable):

2. Are you a member of a church? Yes No If so, what church? _____

3. Are you physically able to perform the duties of a "Leader in Training" as you would understand what this job requires? Yes No

If no, would you be able to perform these duties with reasonable accommodations? Yes No

4. Are you mentally able to perform the duties of a "Leader in Training" as you would understand what this job requires? Yes No

If no, would you be able to perform these duties with reasonable accommodations? Yes No

5. Are you able to work indoors/outdoors without the assistance of manufactured cooling? Yes No If not, please explain: _____

6. Do you use (take) narcotics, hallucinogens or any drugs not prescribed by a physician? Yes No If so, explain what kind and when was last date used: _____

7. Do you drink alcoholic beverages? Yes No If so, how often: Rarely Occasionally Regularly

8. Do you smoke? Yes No If so, how often: Rarely Occasionally Regularly

9. Have you been on any medication within the last year? Yes No If so, please explain: _____

10. Are you currently on any medications that would impair your ability to function as a "Leader in Training"?

Yes No If so, please list: _____

11. Are you currently under a doctor's care or have you been under a doctor's care within the last year?

Yes No If so, please explain situation and care given. _____

12. Have you ever been convicted of a felony? Yes No If yes, describe fully on attached sheet.

13. Is there a moral problem in your life that would affect your involvement? Yes No

SECTION B: SPECIFIC SKILL/ABILITY AREAS

Please rate yourself in the following areas.

(Mark: "I" = interested in helping/leading; "E" = experienced previously)

Music Leadership

- Leading Singing _____
- Lead Guitar _____
- Percussion—Drums _____
- Piano Accompaniment _____
- Running Sound Board _____
- Instrument _____
- Other _____

Programming

- Swimming _____
- Lifesaving _____
- Sailing _____
- Canoeing _____
- Rowing _____
- Kayaking _____
- Power Boating _____
- Water-skiing _____
- Knee boarding _____
- Tubing _____
- Windsurfing _____
- Climbing Wall _____
- Crabbing _____

- Fishing _____
- Nature/Environmental Ed. _____
- Outdoors Living _____
- High Ropes/Elements _____
- Low Elements/Teambuilding _____
- Football _____
- Basketball _____
- Soccer _____
- Baseball _____
- Physical Training _____
- Group Games _____
- Arts/Crafts _____
- Drama _____
- Other _____

SECTION C

Please complete the following information. Additional information may be enclosed on a separate sheet of paper.

Age group Preference: 7-8 year olds 9-10 year olds

1. Explain previous experience with children and responsibilities:

2. Have you ever attended a camp as a camper (other than Wabanna)? Yes No

If yes, when and how often: _____

3. Number of summers you have attended Wabanna as a camper: _____

4. Please explain your interest in being involved in the Leader in Training Program of Camp Wabanna.

5. Please explain your perspective of God _____

6. Explain what it means to have a *servant's heart*.

7. Explain what it means to be part of a *team effort*.

8. Please explain *cultural sensitivity*.

9. Define *leadership*. What characteristics do leaders possess? Please give examples, if possible, of leadership roles you have been given.

We appreciate your honesty and diligence in completing this application. We believe that working with children is a very special privilege that involves many responsibilities. We want our training program to be fun but you must also understand the importance of modeling proper attitudes and behaviors to the campers.

SECTION D

Initial the following statements to indicate your clear understanding and willingness to abide by the rules, policies, and agreements as set forth by Wabanna Camp & Conference Center.

**WABANNA CAMP & CONFERENCE CENTER
101 Likes Road, Edgewater, MD 21037**

ETHICS AGREEMENT

_____ I understand that my commitment to be involved in Wabanna Camp & Conference Center requires certain standards of my lifestyle. I realize that my behavior is a reflection on both the camp's ministry and our Savior Jesus Christ. By my involvement, I will be considered an example and a leader. Others will look to me for direction.

_____ I understand that a daily walk with Christ through the Bible and prayer is essential in order to comply with my responsibilities. I will submit myself to the leadership staff as I realize they are concerned about my personal growth.

_____ I agree to resign my position if I am involved with alcohol, drugs, or sex. I further agree to never steal from anyone and to deal with people in an honest, fair fashion. By a violation of these issues I have forfeited my ability to lead by Godly example at Camp Wabanna.

_____ I accept responsibility for the safety and well-being of the campers that are assigned to my oversight. I will strive to have compassion on all people and to care for each person on an equal level. I will strive to be a servant, without complaining. I realize that a spirit of cooperation is vital to my interaction with other workers.

Signed

Date

SECTION D, continued

Put a check mark next to the following statements to indicate your clear understanding of the doctrine of Wabanna Camp and Conference Center.

**WABANNA CAMP & CONFERENCE CENTER
101 Likes Road, Edgewater, MD 21037**

MISSION STATEMENT

Provide an environment that directs people to the love of Jesus.

DOCTRINAL STATEMENT

1. We believe that the Bible is God's word, infallible and completely inspired by the Holy Spirit.
2. We believe in the Trinity - God the Father, God the Son, and God the Holy Spirit.
3. We believe in the virgin birth of Christ, His physical resurrection, and His ascension into heaven.
4. We believe in the rapture of the church and our eternal home in heaven with the Lord Jesus.
5. We believe in eternal punishment in hell for those who do not accept Christ as their Savior.

I accept the above-mentioned statements as true and agree to function accordingly as a representative of Wabanna Camp & Conference Center.

Signed

Two personal reference forms must be completed and returned as soon as possible. **One must be filled out by your pastor/minister/educator and the other by someone who has known you for a considerable period of time.** The two personal references may not be the same as the supervisor listed below.

Please list last place of employment (supervisor).

Contact Person: _____

Company Name: _____

Position: _____

Address: _____

Phone #: _____

Date of employment: _____

Are your fingerprints on federal file to work with children? Yes No

Person to be notified in Case of Accident or Emergency:

Name: _____

Phone #: _____

Address: _____

Relationship to you: _____

Please indicate week or weeks interested in assisting:

Week 1: June 13-June 19

Week 2: June 20-June 26

Week 3: June 27 -July 3

Week 5: July 11-July 17

Week 6: July 18-July 24

Week 7: July 25- July 31

As a potential "Leader in Training," I realize the task ahead of me is a sacred and serious one. With the Lord's help I will try to fulfill my task to the best of my ability. If I am accepted and then find that circumstance makes it impossible for me to come, I will contact the office immediately.

I attest that any and all information is true. I hereby authorize release of all information with regard to previous employment.

Signature: _____

Parent's Signature: _____

PLEASE ATTACH A RECENT PICTURE TO THIS APPLICATION. THANK YOU

REMINDER: YOU MUST RETURN THE TWO REFERENCE FORMS (ONE OF WHICH MUST BE FILLED OUT BY YOUR PASTOR) OR CALL THE CAMP OFFICE FOR AN EXCEPTION.