SUMMER STAFF Application 2024



PERSONAL INFORMATION

Name:					D.0.B.:			
E-Mail:					S.S.N.:			
Address:								
	City:			State:	Zip Coo	de:		
School:					P/0 Box #:			
Major:				Year:	Freshman	Sophomore	Junior	Senior
Cell Phone	#:				T-shirt Size:			
Home Chu	rch:				Pastor:			
Position	N PREFERE	ENCES/SKILLS	AND CERTIFIC	ATES				
Which posi	ition(s)are	you interested	in?(check one o	or more)				
Prog	ram	Counselor	Office	Tech/Photo	ography Retai	I Kitchen	Housekeep	bing
Healt	th	Maintenance	'Grounds					
List any ski	ills or certi	ficates that wo	uld be utilized d	uring summer car	np. (i.e. Lifeguard, CF	PR, instruments, voo	cals, photograph	ny, etc.)

HEALTH INFORMATION:	
Do you have any physical limitations that would prohibit you from being involved in all camp activities?	Yes No
If yes, please explain:	
List any known allergies:	

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BACKGROUND CHECKS

Do you give Northland consent to run a background check on you? (If your answer is no, you will not be able to joir our staff team.)
Have you ever been convicted of a crime, felony, misdemeanor, forfeiture, or other criminal offense? If "yes," attach an explanation describing the charge(s), legal jurisdiction, and date.
Yes
No
Have you ever been convicted of an offense involving a minor, or endangering the welfare of a child such as child abuse, child neglect, etc. or an offense against a person, such as assault? If "yes," attach an explanation describing the charge(s), legal jurisdiction, and date.

Νο	Yes	
No	٦	
	No	

Is there anything which prevents you from legally working in the United States? If "yes," provide an explanation.

Yes	
No	

SIGNATURE

I hereby certify that the above information to the best of my knowledge is true, accurate, and complete. Any misrepresentations or willful omissions of facts shall be sufficient cause for disqualification of this application or termination of employment. Furthermore, it is understood that this application and records become the property of Northland Camp, which reserves the right to accept it or reject it. I further agree to abide by all rules, regulations, and policies of the camp. I agree to any medical examination or drug testing which may be required upon offer of employment and understand that my employment is contingent upon successful completion of the examination. I understand that employment is "at will" and may be terminated by Northland Camp or myself at any time.

I have applied to Northland Camp as summer staff and authorize them to contact references, pastor or present employers, and any other source of information which may be relevant to my application. I authorize these references, employers, and sources to furnish any and all information requested. Furthermore, I hold harmless and release the same from all liability for any damage associated with providing this information. This agreement voids any prior or written agreements limiting the release of said information. I understand that Northland Camp is a conservative Christian camp.

By submitting this form, I understand that, if given the opportunity to serve, I will receive a weekly stipend for serving at Northland Camp during the summer of 2024. I understand that I am welcome to raise support from friends, family, and local churches to help cover college and other expenses. I also understand that, if given the opportunity to serve, I will provide proof of health insurance upon arrival at Northland.

