



Mount Desert Island

An Equal Opportunity Employer

Volunteer Application

PO Box 381
Mount Desert, ME 04660
Phone: (207) 244-0365
Fax: (207) 244-3355
www.campbeechcliff.org

CAMP BEECH CLIFF MISSION: Camp Beech Cliff provides outdoor education experiences that foster fun, teamwork, self-esteem, leadership, positive decision-making and relationship development through physical and social growth.

Our primary focus is to be a resource for children.

Name _____ Date of Application ____ / ____ / ____

Any other names under which you worked or obtained your education. _____

Winter Address _____

Winter Phone Number _____ Dates of Winter Address _____

Email Address _____ Social Security Number _____

Summer Address _____

Summer Telephone Number _____ Drivers License # and State _____

Are you 18 years of age or older? YES NO

If you are under 18 year old, can you furnish a work permit? YES NO

Do you have a legal right to remain and work in the United States? YES NO

Have you ever been convicted of any crime, including child abuse or sex abuse crimes? YES NO

If yes, explain. And list the court and docket number _____

Type of work desired (please rank according to preference)

1. _____

2. _____

3. _____

3. Special skills or qualifications that relate to work desired _____

Camp Beech Cliff Volunteer Application (continued)

If applying to work directly with children, please check your age preference(s). (Check top two)

_____ Ages 7 - 9 _____ Ages 12 - 13

_____ Ages 9 - 11 _____ Ages 14 - 16

Are you attending school currently?

EDUCATION

High School/College/Higher Education	Location	Course of Study	Dates/Degrees
--------------------------------------	----------	-----------------	---------------

EMPLOYMENT (List current or most recent job first)

Agency	Supervisor	Position	Address	Phone #	Dates
--------	------------	----------	---------	---------	-------

CAMP/RECREATION EXPERIENCE (As staff, volunteer or participant)

Camp	Position	Supervisor	Address	Phone #	Dates
------	----------	------------	---------	---------	-------

Camp Beech Cliff Volunteer Application (continued)

CERTIFICATIONS

Please describe any certifications or training that may be useful for a camp volunteer.

Name of Certification	Issuing Organization	Expiration Date
First Aid _____		
CPR _____		
Water Safety Instructor _____		
Life Guard Training _____		
First Aid Instructor _____		
Camp Health Officer _____		
Other Certifications or Training _____		

OFFICE RELATED SKILLS

Check Skills/Experience with the following:

General Office Skills

- Fax Machine
- Copier
- Telephone
- Public Contact

Computer Skills

- Desktop Publishing
- Quickbooks
- Word Processing
- Spreadsheet
- Database
- Web Design

Camp Beech Cliff Volunteer Application (continued)

PROGRAM SKILLS

Please rank your skill/instructional ability for the following activities.

“1” Those activities in which you can organize and instruct independently.

“2” Those activities in which you can assist or co-instruct.

“3” Those activities in which you have experience or an interest in.

Leave blank those activities in which you have no interest or experience.

ARTS AND CRAFTS

- ___ Batik/Tie Dyeing
- ___ Beading
- ___ Candle Making
- ___ Clay/Ceramics
- ___ Leather Craft
- ___ Nature Crafts
- ___ Painting
- ___ Juggling
- ___ Woodworking/Carving
- ___ Graphic Design
- ___ Photography
- ___ Other _____

ENVIRONMENTAL

EDUCATION

- ___ Astronomy
- ___ Birds
- ___ Conservation
- ___ Forest Ecology
- ___ Flowers/Trees
- ___ Insects
- ___ Marine Biology
- ___ Geology
- ___ Weather
- ___ Wildlife
- ___ Other _____

SPORTS/GAMES

- ___ Archery
- ___ Tennis
- ___ Baseball/Softball
- ___ Basketball
- ___ Frisbee Golf
- ___ New Games
- ___ Parachute Activities
- ___ Soccer
- ___ Volleyball
- ___ Ultimate Frisbee
- ___ Other _____

AQUATICS

- ___ Canoeing
- ___ Kayaking
- ___ Life Guarding
- ___ River Rafting
- ___ Sailing
- ___ Swimming Lessons

OUTDOOR LIVING SKILLS

- ___ Backpacking
- ___ Fire Building
- ___ Hiking
- ___ Knot tying
- ___ Low Impact Camping
- ___ Orienteering
- ___ Outdoor Cooking
- ___ Shelters
- ___ Survival
- ___ Trip Leading
- ___ Fishing
- ___ Raft Building
- ___ Other _____

PERFORMING ARTS

- ___ Creative Dancing
- ___ Creative Drama
- ___ Native American History
- ___ Instrument(s) _____
- ___ Play Directing
- ___ Song Leading
- ___ Skits
- ___ Story Telling
- ___ Other _____

CHALLENGE COURSE

- ___ High Ropes
- ___ Low Ropes
- ___ Initiatives
- ___ Cooperative Games
- ___ Rock Climbing
- ___ Belaying
- ___ Rappelling

REFERENCES

New applicants: List 3 references on the below lines. References will be verified.

Name	E-mail Address	Phone #	Relationship
1. _____	_____	_____	_____
2. _____	_____	_____	_____
3. _____	_____	_____	_____

Camp Beech Cliff Volunteer Application (continued)

Camp Beech Cliff expects every Staff Member to act in a professional manner both on- and off-duty. If you have doubts about your ability to deal honestly and successfully with Camp Beech Cliff expectations, please do not commit yourself to working at Camp Beech Cliff. **All Staff Members are expected not to use illegal drugs or use alcohol in an illegal or irresponsible manner** (the legal drinking age in Maine is 21) and to avoid the possession or consumption of alcoholic beverages on Camp Beech Cliff Property except at the rare Camp Beech Cliff activity where this might be officially sanctioned. Staff Members are expected not to use tobacco products of any kind on Camp Beech Cliff property.

I CERTIFY THAT THE FACTS CONTAINED IN THIS APPLICATION ARE TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND UNDERSTAND THAT, IF EMPLOYED, FALSIFIED STATEMENTS ON THIS APPLICATION SHALL BE GROUNDS FOR DISMISSAL.

I AUTHORIZE INVESTIGATION OF ALL STATEMENTS CONTAINED HEREIN AND THE REFERENCES LISTED ABOVE TO GIVE YOU ANY AND ALL INFORMATION CONCERNING MY PREVIOUS EMPLOYMENT AND ANY OTHER INFORMATION THEY MAY HAVE, PERSONAL OR OTHERWISE, AND RELEASE ALL PARTIES FROM LIABILITY FOR ANY DAMAGE THAT MAY RESULT FROM FURNISHING SAME TO CAMP BEECH CLIFF.

IN THE EVENT I AM OFFERED A POSITION I AGREE TO FURNISH MY DOB FOR THE PURPOSE OF A CRIMINAL RECORDS CHECK AND A MOTOR VEHICLE RECORDS CHECK. I ALSO UNDERSTAND AND AGREE THAT, IF HIRED, MY EMPLOYMENT IS FOR NO DEFINITE PERIOD AND MAY, REGARDLESS OF THE DATE OF PAYMENT OF MY WAGES AND SALARY, BE TERMINATED BY EITHER EMPLOYER OR EMPLOYEE AT ANY TIME WITHOUT ANY PRIOR NOTICE AND I UNDERSTAND THAT THIS APPLICATION IS NOT AN EMPLOYMENT CONTRACT.

SIGNATURE _____ **DATE** _____