

# KICKAPOO KAMP

## STAFF APPLICATION

Orientation (required)

Enclose  
Small  
Photo

RETURN TO:

May 31-June 4

Laura Hodges

Term 1—June 5-June 17

10310 Quail Meadow Dr.

Term 2—June 19-July 8

San Antonio, Tx. 78230

Term 3—July 10-July 29

(210) 690-8361 fax: (210) 690-5731

(check the terms you would  
be available to work)

NAME \_\_\_\_\_ Date of Application \_\_\_\_\_  
Last Name First Name

Home Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Area code/Home Phone Number (\_\_\_\_) \_\_\_\_\_ **Your Cell Phone Number** (\_\_\_\_) \_\_\_\_\_

Your Address at School \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ **Your E-mail address** \_\_\_\_\_

Birthdate \_\_\_\_\_ Age \_\_\_\_\_ Height \_\_\_\_\_ Weight \_\_\_\_\_ Religion \_\_\_\_\_ Marital Status \_\_\_\_\_

College/University \_\_\_\_\_ Classification \_\_\_\_\_

Major \_\_\_\_\_ College Clubs or Organizations \_\_\_\_\_

Referred By \_\_\_\_\_ (if applicable)

CAMP EXPERIENCE (as camper or counselor). List most recent first.

Position	Camp	Address	Dates
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RECORD OF EMPLOYMENT. List most recent first.

Firm Name & Address	Dates of Employment	Type of work	Supervisor
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In the following list, put numeral "1" before those activities you can organize, teach, and would **PREFER** to teach; "2" for those activities in which you have **training or experience**; and "3" for those activities in which you could **actively assist**:

**PRIMARY CAMP ACTIVITIES**

**HORSEBACK RIDING**

- \_\_\_ Western
- \_\_\_ Care & Grooming

**AQUATICS**

- \_\_\_ WSI \_\_\_ Lifeguard Certification

**SWIMMING**

**CANOEING**

**WATER SKIING**

- \_\_\_ Boat Driving
- \_\_\_ Synchronized Swimming

**TENNIS**

**PING PONG**

**GYMNASTICS**

- \_\_\_ Tumbling & Floor
- \_\_\_ Beam
- \_\_\_ Uneven Parallel Bars

**RIFLERY**

- NRA Instructor  
(yes or no)

**ARCHERY**

**ARTS & CRAFTS**

- \_\_\_ Painting/Acrylics
- \_\_\_ Leather Work
- \_\_\_ Needlepoint/latchhook
- \_\_\_ Cross-stitch/Embroidery
- \_\_\_ Sketching/Pastels
- \_\_\_ Macrame
- \_\_\_ Paint Pens/Personalizing
- \_\_\_\_\_
- \_\_\_\_\_

**NATURE STUDY**

- \_\_\_ Trees
- \_\_\_ Flowers
- \_\_\_ Birds
- \_\_\_ Snakes
- \_\_\_ Insects
- \_\_\_ Astronomy

**AEROBIC DANCE/**

**EXERCISE**

**TWIRLING**

**FLAGS**

**DANCE**

- \_\_\_ Tap/Ballet
- \_\_\_ Jazz
- \_\_\_ Western
- \_\_\_ Modern

**DRILL TEAM**

**CHEERLEADING**

**DRAMA**

- \_\_\_ Skits & Stunts
- \_\_\_ Creative
- \_\_\_ Play Directing

**MODELING & CHARM**

**CAMP CRAFT**

- \_\_\_ Outdoor Cooking
- \_\_\_ Knot Tying
- \_\_\_ Trail Blazing
- \_\_\_ Fishing

**INDIAN LORE**

- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

Add any activities you know you could teach and you feel the campers would enjoy in the blank spaces provided.

**SECONDARY CAMP ACTIVITIES**

- \_\_\_ CPR \_\_\_ Exp. Date
- \_\_\_ Standard First Aid
- \_\_\_ Overnight Camping
- \_\_\_ Music(lead singing)
- \_\_\_ Guitar
- \_\_\_ Bridge
- \_\_\_ Camp Store

**LAND SPORTS**

- \_\_\_ Soccer
- \_\_\_ Softball
- \_\_\_ Volleyball
- \_\_\_ Track & Field
- \_\_\_ Basketball
- \_\_\_ INFORMAL GAMES

\_\_\_ Sunday Services

- \_\_\_ Library
- \_\_\_ Photography
- \_\_\_ Journalism/Newspaper
- \_\_\_ **Computer Skills—List experience and program knowledge on separate sheet.**

Would you be interested in being a cabin counselor and working part-time in the office? yes    no

Circle age group you prefer in your cabin at camp 7 8 9 10 11 12 13 14 15

Experience in subjects you **prefer** to teach:

Why do you want to be a summer camp counselor?

**NOTE:** To be a successful Kickapoo counselor, you must consistently display responsibility, mature judgment, a genuine love for children, a commitment to excellence, and the ability to follow camp policies and procedures. These children are their parent's most precious possessions, and we must deserve their trust.

I certify that, to the best of my ability, the information on this application is correct. I give Kickapoo Kamp my permission to check my references and my background.

\_\_\_\_\_  
(Signature)

Social Security # \_\_\_\_\_

Driver's License # \_\_\_\_\_

# Confidential Questionnaire

Each year for 75 years, several hundred parents have entrusted us with the opportunity to work with and care for their young daughters for four weeks.

Due to the relationship of trust imposed upon us and each of our staff members, it is imperative that only persons of the highest fitness - mentally, morally, physically and psychologically - be employed to work at our camp. We hold dear our values and attempt to impart them to those we serve.

We respect the right of others to share different values and different lifestyles. However, to protect our campers and their parents, our staff members and ourselves, we are now requiring each employee of Kickapoo Kamp to complete and submit this Confidential Employment Questionnaire. It will be submitted to and will be reviewed only by the Owner/Directors.

It is a condition of employment for each person, each year to complete the questionnaire. The questions and your answers will be an integral part of your employment contract as fully as if set out in detail. No person will be employed who has not completed and signed this document.

Should you desire to discuss any part of this with Bimmie you may feel free to do so, confident that the entire matter will remain strictly confidential.

DO YOU SMOKE? \_\_\_\_\_ EXPLAIN \_\_\_\_\_

DO YOU USE ALCOHOL? \_\_\_\_\_ EXPLAIN \_\_\_\_\_

Counselors are not allowed to consume alcoholic beverages on camp or return to camp under the influence of alcohol while on contract. Will you be able to comply with this policy?

DO YOU USE MARIJUANA OR OTHER ILLEGAL DRUGS? \_\_\_\_\_ EXPLAIN \_\_\_\_\_

DO YOU HAVE ANY CONVICTION RECORDS OF CRIMINAL ACTS? \_\_\_\_\_

IF YES, GIVE DATES, NATURE OF THE VIOLATIONS, AND ANY REHABILITATIONS:

DO YOU HAVE ANY TENDENCIES TOWARD HOMOSEXUALITY? \_\_\_\_\_

EXPLAIN \_\_\_\_\_

HAVE YOU EVER HAD ANY JOB RELATED INJURY? \_\_\_\_\_ EXPLAIN \_\_\_\_\_

HAVE YOU EVER COLLECTED ON WORKMAN'S COMPENSATION? \_\_\_\_\_

EXPLAIN \_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date