



# Wyckoff Family YMCA Camp Wydaca

## EMPLOYMENT APPLICATION

Please fill out completely

Date of Application \_\_\_\_\_

Name \_\_\_\_\_

Home Phone \_\_\_\_\_

Address \_\_\_\_\_

Cell Phone \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

E-mail Address \_\_\_\_\_

College Address (if applicable) \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**DATES AVAILABLE:** \_\_\_\_\_

### EDUCATION:

| SCHOOL NAME & ADDRESS:<br>(High school, College, Trade) | MAJOR COURSE or DEGREE<br>Program: | DIPLOMA / DEGREE RECEIVED |
|---|------------------------------------|---------------------------|
|   |                                    |                           |
|   |                                    |                           |
|   |                                    |                           |

### I am applying for the position of:

- Junior Counselor **(Must be 16 years old by the start of camp)**
- Junior/Senior Counselor **(Must be 17 years old by the start of camp)**
- Senior Counselor **(Minimum age 18 years old by the start of camp)**

Do you hold a current CPR Certification?  Yes  No Expiration: \_\_\_\_\_ CPR Level: \_\_\_\_\_

Do you hold a current First Aid Certification?  Yes  No Expiration: \_\_\_\_\_

Do you hold a current Lifeguarding Certification?  Yes  No Expiration: \_\_\_\_\_

# 2017 Camp Staff Application Supplement

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Have you worked with children before?  Yes  No

If yes, please indicate the age groups you have experience working with:

Pre-School (Ages 3-5)  Youth (Grades 1-5)  Teens (Grades 6&up)

Which gender and age group do you prefer to work with? Please rank in order of preference.

|   |   |
|---|---|
| <input type="checkbox"/> Girls<br><br><input type="checkbox"/> Boys<br><br><input type="checkbox"/> No Preference | <input type="checkbox"/> 3 - 4 year olds (½ day program)<br><br><input type="checkbox"/> Kindergarten<br><br><input type="checkbox"/> Grade 1 - 2<br><br><input type="checkbox"/> Grade 3 - 5<br><br><input type="checkbox"/> Grade 6 - 8 |
|---|---|

By using the numbers below, please mark each activity according to your ability to lead children.

1 = Able to lead children

2 = Able to assist in leading children

3 = No experience in this area

\_\_\_ Football  
 \_\_\_ Soccer  
 \_\_\_ Baseball  
 \_\_\_ Basketball  
 \_\_\_ Lacrosse  
 \_\_\_ Floor Hockey

\_\_\_ Martial Arts  
 \_\_\_ Cheer/Gymnastics  
 \_\_\_ Dance  
 \_\_\_ Theater  
 \_\_\_ Swimming  
 \_\_\_ Arts/Crafts

\_\_\_ Cooking  
 \_\_\_ Nature/Outdoor Living  
 \_\_\_ Quiet Games  
 \_\_\_ Active Games  
 \_\_\_ Leadership Skills  
 \_\_\_ Team Building Activities

### REFERENCES:

List at least 4 references/persons that know you well and can attest to your abilities and suitability for YMCA employment (one reference must be a family member). Names must correlate with 3 attached forms to be returned.

| NAME: | PHONE NUMBER: | RELATIONSHIP TO YOU: | YEARS KNOWN: |
|-------|---------------|----------------------|--------------|
| 1.    |               |                      |              |
| 2.    |               |                      |              |
| 3.    |               |                      |              |
| 4.    |               |                      |              |

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## Page 3

How would you describe yourself?

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Where did you gain this experience?

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What personal experiences or training have you had to prepare you for this position?

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How would you work with a child who has behavior difficulties?

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Have you ever been released from a position working with children?  Yes  No If so, why?

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Please tell us why you want to be part of our camp staff.

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Are you able to handle the long hours and the high-energy level required?

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What character qualities do you possess that would be particularly useful as a camp staff member?

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**Physical Exam and Mantoux Results Required.** State law requires that staff have a physical examination within a one-year period before their first day of work. Verification of this physical is required. Staff members must also provide verification of a MantouxTest completed within the last two years.

**Staff Dress Code:** Staff will be issued two (2) camp shirts that should be worn with shorts. Sneakers are required. For safety reasons, jewelry, open toed shoes, sandals and flip flops are not permitted.

**VACATION/TIME OFF:** The Wyckoff Family YMCA will permit summer staff to take vacation time equivalent to one week (5 days) between June 27nd and August 19for a family vacation and/or school/sport related camp. Vacation must be requested and approved in writing prior to June 1st.

**VACATION DATES REQUESTED:** \_\_\_\_\_

Staff workday begins at 8:15am Monday through Friday. Camp day ends approximately 4:15pm at the discretion of camp directors. Mandatory staff meetings will be periodically scheduled outside of the normal camp day.

### COUNSELOR ORIENTATION:

There will be three mandatory Counselor Orientations for all hired applicants. You will be notified of these dates upon position acceptance.

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### NOTICE TO APPLICANTS:

The YMCA maintains a "zero tolerance" for child abuse and/or substance abuse. **Criminal background check and other federal or state screenings for child abuse will be conducted.**

Have you previously worked for any YMCA?  Yes  No If yes, when \_\_\_\_\_

YMCA Name & Address \_\_\_\_\_

Are you 18 yrs. of age or older?  Yes  No If not, you will be required to furnish working papers upon hire.

Do you have any pending charges or have you ever pled guilty or been convicted of a crime, felony, disorderly persons offense, drunk driving offense, public indecency or other violation of law? Do not include convictions that have been annulled, expunged or sealed by a court?

No  Yes, detail \_\_\_\_\_

Offenses against persons or family?

No  Yes, detail \_\_\_\_\_

Answering "Yes" to these questions does not constitute an automatic bar to employment but will be considered in relation to the position sought.

# APPLICANT STATEMENT:

I certify that all information I have provided in order to apply for and secure work with the YMCA is true, complete and correct, and I understand that any information provided by me that is found to be false, incomplete or misrepresented in any respect, will be sufficient cause to (i) cancel further consideration of this application, or (ii) immediately discharge me from the YMCA's service, whenever it is discovered.

\_\_\_\_\_Initial

I expressly authorize, without reservation, the YMCA, its representatives, employees or agents to contact and obtain information from all references (personal and professional), employers, public agencies, licensing authorities and educational institutions and to otherwise verify the accuracy of all information proved by me in this application, resume or job interview. I hereby waive any and all rights and claims I may have regarding the YMCA, its agents, employees or representatives, for seeking, gathering, and using such information in the employment process and all other persons, corporations, organizations for furnishing such information about me. I am aware that I have the right to make written request for disclosure of the nature and scope of any report that may be ordered.

\_\_\_\_\_Initial

I understand upon offer of employment, the YMCA will conduct a criminal background check prior to and during my employment as well as a child abuse registry check and I am subject to a random, accident follow-up, and for cause drug testing, as well as post offer drug screening contingent on employment.

\_\_\_\_\_Initial

I am not a child molester, abuser, or pedophile; and have not been accused of being a molester or abuser.

\_\_\_\_\_Initial

I understand that the YMCA does not discriminate in hiring or employment on the basis of race, color veteran's status, religious creed, national origin, sex, ancestry or age; or on the basis of a handicap not limiting the applicant's ability to perform satisfactorily the job available. The YMCA will give this application every reasonable consideration. However, in accepting it, the YMCA makes no commitment of employment to the applicant.

\_\_\_\_\_Initial

I understand that this application remains current for only 120 days. At the conclusion of that time, if I have not heard from the YMCA and still wish to be considered for employment, it may be necessary to reapply and fill out a new application. **Employment with the YMCA is employment at will** which means that employees may end their employment at any time, for any reason; and that the employer (the YMCA) may terminate employees at any time for any reason, with or without cause.

\_\_\_\_\_Initial

I understand that if I am hired, I will be required to provide proof of identity and legal authority to work in the United States and that federal immigration laws require me to complete an I-9 Form in this regard and

**I certify that I have read, fully understand and accept all terms of the forgoing applicant statement. Do not sign until you have read and initialed the above states.**

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Signature of Applicant

Date

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Signature of Parent if applicant is under 18 years of age

Date

Parent's Name (Please Print): \_\_\_\_\_

## FOR YMCA USE ONLY:

Date Received: \_\_\_\_\_

Date Contacted: \_\_\_\_\_

# Camp Wydaca Reference Questionnaire

COUNSELOR NAME: \_\_\_\_\_

POSITION: \_\_\_\_\_

In what capacity have you known this individual? How long?

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Why would you be willing to have your children under this individual's leadership during one of Camp's two-week sessions?

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What would you rate as this person's greatest assets to children in a camp program?

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What are your reservations about this person's character or ability to work successfully with children and fellow staff?

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May we call for further information if necessary?  Yes  No

Name (please print) \_\_\_\_\_

Address \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_

Signature \_\_\_\_\_

**Please return this form to:**  
**Wyckoff Family YMCA**  
**691 Wyckoff Ave**  
**Wyckoff, NJ 07481**  
**Attn: Chris Pillari**



# Camp Wydaca Reference Questionnaire

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In what capacity have you known this individual? How long?

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