

Volunteer Application [Use Black or Blue Ink]

Name: _____

Birthdate: _____

STREET ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

Email: _____

PHONE: _____

SCHOOL GRADE for 2025/2026 School Year 9 10 11 12 College

HAVE YOU BEEN A CAMPER OR COUNSELOR AT GRACE SUMMER CAMP BEFORE? Yes No

Camper - How many years? _____

Counselor – How many years? _____

WHY DO YOU WISH TO SERVE AS A COUNSELOR AT GRACE CAMP?

PLEASE DESCRIBE ANY PAST EXPERIENCE YOU'VE HAD IN WORKING WITH CHILDREN.

[REFERENCES MUST BE A NON-FAMILY MEMBER]

NAME: _____

PHONE: _____

STREET ADDRESS: _____

CITY: _____ State: _____ Zip: _____

RELATIONSHIP TO YOU: _____

NAME: _____

PHONE: _____

STREET ADDRESS: _____

CITY: _____ State: _____ Zip: _____

RELATIONSHIP TO YOU: _____

In the past 10 years, have you ever been discharged or suspended from employment for disciplinary reasons, or have you been asked to resign? Yes No

If YES please explain. _____

Have you ever been charged, convicted, plead guilty or “no contest” to any crime? Yes No

If yes, please state the type of crime and the circumstances with regard to each including date of conviction, or plea and the penalty, if any imposed by the court. _____

I certify that all statements made by me on this application are true and complete to the best of my knowledge and that I have withheld nothing that would, if disclosed, affect this application unfavorably. I understand and agree that any misrepresentation or omission of facts would exclude my serving as a counselor. I HEREBY ACKNOWLEDGE THAT I HAVE READ AND UNDERSTOOD THE ABOVE STATEMENTS AND THAT I VOLUNTARILY SIGN THIS APPLICATION.

Applicant Signature

DATE

Parent / Guardian Signature if applicant is under the age of 18.

DATE