

Supplemental Questions Please type your response to these questions in detail on a separate sheet of paper.

1. Describe your greatest achievement. Why was it significant, what steps did you take toward the achievement, what was your motivation, who did you work with, and what was a setback or challenge you encountered?
2. What skills and experience do you have working with children?
3. What other skills and experience would you bring to our camp community?
4. What goals do you have for this summer; what are you looking to gain from a summer at YMCA Camp Collins?
5. YMCA Camp Collins expects its employees to be drug/alcohol free for the summer. Do you see yourself having any problems correctly following this policy throughout the summer?

Organized Camp Experience Staff or Camper. Please include Outdoor School.

Position	Camp Name	Camp Director	Phone	Dates

Program Skills Please rate yourself in the following activities that you have experience with.

“*Teach:*” can competently and independently teach to youth. “*Assist:*” can assist in teaching to youth
“*Exp:*” have had some experience with

<input type="checkbox"/> Horseback Riding	<input type="checkbox"/> Drama	<input type="checkbox"/> Astronomy	<input type="checkbox"/> Leave No Trace
<input type="checkbox"/> Horse Care	<input type="checkbox"/> Storytelling	<input type="checkbox"/> Environ. Science	<input type="checkbox"/> Survival Skills
<input type="checkbox"/> Rock Climbing	<input type="checkbox"/> Song Leading	<input type="checkbox"/> Birds	<input type="checkbox"/> Firebuilding
<input type="checkbox"/> Archery	<input type="checkbox"/> Folk/Square Dancing	<input type="checkbox"/> Insects	<input type="checkbox"/> Orienteering
<input type="checkbox"/> Mtn Biking	<input type="checkbox"/> Arts & Crafts	<input type="checkbox"/> Geology	<input type="checkbox"/> Outdoor Cooking
<input type="checkbox"/> Field Games		<input type="checkbox"/> Weather	<input type="checkbox"/> Swimming
<input type="checkbox"/> Teambuilding		<input type="checkbox"/> Wildlife	

References Please include one relative and print clearly.

Name	Relation to Applicant	Daytime Phone	Evening Phone	Occupation
1.				
2.				
3.				
4.				

Please Read

YMCA Camp Collins is committed to providing a safe environment for our campers and staff. We are aware that there are people who seek employment working near children for the wrong reasons.

Therefore, through the initial screening process and on-going supervision, we do everything in our power to monitor the safety and well being of our campers and staff.

In order for YMCA Camp Collins to attract the highest quality staff, extensive inquiries may be made concerning your prior employment and background.