



# Application for employment at Camp Lael

Please send to Camp Lael at 2062 Ferns Road Lapeer, Michigan 48446  
Phone: 1-800.636.8452 fax: 810.664.7031 email: jimdavis@camplael.com

The application deadline for summer camp employment is April 1st. Applicants will hear back from us by April 15th. Staff training begins June 15, 2010 and attendance is mandatory for all camp employees. Thanks or your interest in working at Camp Lael. If you have any questions please contact Jim Davis, camp director.

## Personal information:

Full Name \_\_\_\_\_ preferred name \_\_\_\_\_

Current Address \_\_\_\_\_ (Zip code)

Phone \_\_\_\_\_ Email address \_\_\_\_\_ Shirt size \_\_\_\_\_

Home address \_\_\_\_\_  
(if different from above) (phone number if different from above)

Emergency Contact person: \_\_\_\_\_  
(Parents names preferred) (phone number or cell phone number)

Are you over 18? \_\_\_\_\_ Present year in school \_\_\_\_\_

Name of School/College/University \_\_\_\_\_

## Work history, Activities, etc.

List previous work experience or check here if this is your first job

(Company name) (Address) (contact person and phone number)

Job title \_\_\_\_\_ describe job \_\_\_\_\_

(Company name) (Address) (contact person and phone number)

Job title \_\_\_\_\_ describe job \_\_\_\_\_

List activities/honors/offices you participate in at school and at your church \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## Position(s) you are applying for:

Counselor

Counselor in training (CIT)  
(CIT is a voluntary position only)

Health officer

Waterfront director

Lifeguard  
(lifeguards and waterfront director must be lifeguard certified)

Maintenance helper

Kitchen helper

Activity director

### **Information about you related to your faith**

Church you attend \_\_\_\_\_

Describe your involvement \_\_\_\_\_

Pastors name \_\_\_\_\_ how long you have attended \_\_\_\_\_

Describe your faith journey and your current commitment to Jesus Christ \_\_\_\_\_

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### **Reference information**

(please hand out the three reference forms and list those people below. One reference form should be completed by your pastor.)

Name \_\_\_\_\_

Address \_\_\_\_\_ phone \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_ phone \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_ phone \_\_\_\_\_

Please do not use person related to you as references. Good choices for references are pastors, teachers, and adult friends of your family. Always ask before listing a reference. Your references must also be received before April 1st in order for you to be considered for employment at Camp Lael. Choose your references wisely.

### **Signatures**

I certify that the above information is true and correct to the best of my knowledge.

Signed: \_\_\_\_\_ date \_\_\_\_\_

Parents signature: \_\_\_\_\_

(only if you are under 18 years of age)

Camp Lael began in 1947 as the Detroit Baptist Camp. The ministry is owned by the American Baptist Churches of Michigan. Camp Lael is open all year round and conducts a five week summer camp program for children and youth ages 8-17. The program and facility is licensed by the State of Michigan. We have 240 acres of property on a 70 acre lake and can accommodate 150 campers at one time.