

2017 Camp Staff Application

I understand that filling out this form in no way obligates me or the Native American Fellowship of the Assemblies of God, but merely furnishes useful information in selecting camp staff.

STAFF: Southwest Youth Camp: Age 21 and older

Last Name: _____ First Name: _____ Middle Name: _____

Maiden Name or Other Name Used: _____

Address, City, State, Zip: _____

Email Address _____

Social Security Number * _____ Date of Birth * _____

Driver's License Number _____ State of License _____

Home Phone _____ Work Phone _____ Sex: M _____ F _____

COST \$ 25.00 PER STAFF MEMBER

Christian Experience: Home Church _____ Pastor _____

How long have you been saved? _____ Baptized in the Holy Spirit? _____

Emergency Contact: Name _____ Phone # _____

Have you ever been convicted of a felony or child abuse? ____ Yes ____ No If yes, explain _____

(Use back of this form to explain)

REFERENCES: (Signatures of your Pastor & an unrelated person are required) Having confidence in this applicant's ability, qualification of education, training, and Christian experience I recommend the consideration of his/her application for staff at Youth Camp. I further believe this individual has appropriate character and emotional stability to serve.

1. Name _____

(Signature of Pastor) (Phone)

2. Name _____

(Signature of Unrelated Person) (Phone)

If I am selected as camp STAFF I am under the full understanding that I will follow the manual's instructions and will be under the authority of the Camp Director. As a staff member, I understand that I am at camp so that students will learn about God, and I will direct their attention to the speaker, services, and events throughout the camp.

AUTHORIZATION/CONSENT

During the application process and at any time during the volunteer of my service with Native American Fellowship of the A/G, I hereby authorize Lexis Nexis Services Inc., on behalf of the Native American Fellowship of the A/G to procure a background report which I understand may include information regarding my character, general reputation, or personal characteristics. This report may be compiled with information from courts record repositories, departments of motor vehicles, past or present employers and educational institutions, governmental occupational licensing or registration entities, business or personal references, and any other source required to verify information that I have voluntarily supplied. I understand that I may request a complete and accurate disclosure of the nature and scope of the background verification, to the extent such investigation includes information bearing on my character, general reputation, or personal characteristics.

(Signature of Applicant)