

The Mountaintop

May 29-31, 2010

Staff Volunteer Application

Application is Due by **May 1, 2010**

*Send application payments (if over the age of 18 a background payment of \$15.00) to:

Helen Garrett
1120 South Avenue, D-3
Forest Park, GA 30297

Applicant Information

First Name _____ Last Name _____
Address _____
City _____ Birth Date (mm/day/year) _____
State _____ Zip Code _____ Home Phone () _____

Email Address:

Parent/guardian name(s) - for minors: _____

Mountaintop Staff before? (Circle): **YES / NO** Year(s): _____ What capacity/where? _____

Does the applicant have a condition that limits or prohibits applicant's physical activity? (Circle): **YES / NO** If yes, please explain below. If no response is given, The Mountaintop will assume that applicant can engage in all camp-related activities.

T-shirt Size (Circle): **S** (34-36) **M** (38-40) **L** (42-44) **XL** (46-48) **XXL** (Over 48)

Areas where you feel you are competent and capable of serving (check all that apply)

- Basketball Volleyball Dance Ultimate Frisbee Nursery (2 and under)
 Flag Football Arts & Crafts Video Production Water-Front Activities
 Dining Hall Monitor Canoeing Worship Team Food Service (Kitchen)
 Photography Nurse/First Aid Late Night Security Audio/Visual – Stage help
 Counselor Counselor-In-Training (CIT) Li'l Toppers (Children's Program)
 Campus Improvement Safety Monitor

Preferred Positions & Experience - Describe your experience, training and certification in the areas that you have selected. If you desire to be on the counseling staff, please let us know the preference of the age group.

First Choice: _____ Experience: _____

Second Choice: _____ Experience: _____

Third Choice: _____ Experience: _____

- I have current **CPR** certification I have current **First Aid** certification
 I have current **Lifesaving** certification
 Other _____

The Mountaintop Volunteer Service Request

I, the undersigned, hereby agree to donate any and all my time served as a Staff Volunteer at The Mountaintop Camp, voluntarily, without expectation of payment or compensation, in order to assist The Mountaintop program.

If I am accepted as a Mountaintop volunteer, I understand that all my time is donated of my own free will. Further, I understand that during the time that I serve, I am a volunteer, not an employee, nor do I hold expectations for future employment as a result of my volunteering. I do not expect benefits for which I would otherwise be entitled as an employee. I understand that my room and board will be provided as a courtesy at The Mountaintop, if accepted. I also understand that if accepted as a volunteer, this service relationship is mutually agreed-upon and is terminable at will by either party. It is understood that the above-mentioned time for service is only an intention on my part for planning purposes and does not commit me to any binding scheduled hours.

Date: _____

Signature: _____

Print Name: _____

Address: _____

Phone: _____

Signature of parent/or guardian:
(Only if applicant is under 18) _____

Applicant Information (This supplemental information is required for applicants for volunteer service at The Mountaintop Camp whose desired position includes, or might include, working with, or in close proximity to, minors.)

Do you ever drink alcohol to the point of drunkenness? (Circle): **YES / NO**
Do you use illegal drugs? (Circle): **YES / NO**

Have you ever been arrested for or convicted of a crime? (You may exclude certain misdemeanors the law exempts from disclosure. Conviction will not necessarily disqualify you.) (Circle): **YES / NO**

Have you ever been arrested for or convicted of child abuse, child molestation, child neglect, sexual assault, rape, or any other sex crimes, drug crimes or violent crimes? (Circle): **YES / NO**

Have you ever had a civil judgment entered against you or is there a pending complaint against you concerning intentional injury against others or your treatment of minors? (Circle): **YES / NO**

I attend a church worship service or small group at least twice a month (Circle): **YES / NO**

I am baptized (not a requirement) (Circle): **YES / NO**

Jesus Christ is my Lord and Savior and I have a personal relationship with him (Circle): **YES / NO**

Are you able to pay the \$40 camp fee to help offset camp expenses (Circle): **YES / NO**

Date(s) of arrest/conviction(s) _____ Case number(s) _____ of
Location(s) _____
arrest/conviction(s) _____

Is any such criminal or civil case currently pending against you or on appeal? (Circle): **YES / NO**
What were you convicted of? What was the judgment entered against you?

***Criminal background is due if you have not had one in the last three (3) years, send payment with application.**

Applicant Certification

I am making application for voluntary service with The Mountaintop. I certify that to the best of my knowledge the information provided by me in this application is accurate, complete and without material omission.

I authorize The Mountaintop to investigate the statements contained in the application. I also release The Mountaintop and any person, company or institution that provides The Mountaintop with information concerning my background from any and all liability or claims that may result from the investigation, use or disclosure of such information, and/or any damage that may result. I understand that any misrepresentation, falsification, or material omission of information on this application may result in my failure to receive an offer, the withdrawal of an offer, or if I am accepted as staff, in my dismissal from staff position.

I understand and agree that this certification will become a part of the terms and conditions of acceptance if I am offered, and accept a staff position. I acknowledge that acceptance by The Mountaintop is neither guaranteed, permanent, nor for any specified period of time, and that I may resign, at-will, at any time and The Mountaintop may terminate my staff position, at-will, at any time with or without cause, and with or without prior notice.

I understand that this application augments all other applications previously submitted to The Mountaintop by the undersigned applicant.

I understand that The Mountaintop *does not* provide personal medical or health insurance, and that it is my responsibility to provide personal insurance.

The Mountaintop may use any photos or videotapes taken of me at any camp event in their publications or those of their sponsor, Generations Camp Ministry.

I support the policies of The Mountaintop and Generations Ministries.

In keeping with its Christ-centered mission, The Mountaintop sets high standards of personal conduct. These standards include rules against intoxication or possession of intoxicants, sexual misconduct, use or possession of illegal drugs, stealing, smoking, disorderly conduct, intentional destruction of property, refusal to cooperate with The Mountaintop personnel or any conduct or attitudes not in keeping with Christian standards.

I understand that staff members who do not abide by the rules and policies of The Mountaintop, or whose conduct or attitude undermine the wholesome, positive, and Christ-centered camp environment, may be dismissed, and their travel arrangements to return home will be made at their own expense.

THE UNDERSIGNED HAS CAREFULLY READ THIS CERTIFICATION AND FULLY UNDERSTANDS AND AGREES WITH ALL OF THE ABOVE.

X _____
Applicant's signature

Date

Application Process

DEADLINE: Applications will be reviewed as they are received. Please submit this application by **May 1, 2010** to be considered for acceptance.

MONEY: Please make your check payable to **The Mountaintop**. *Please send \$15 criminal background check fee with the staff application. If you would also like to make the \$40 camp payment in advance, please send along with the application. *Criminal background is due if you have not had one in the last three (3) years, send payment with application.

MAIL APPLICATION TO:

**Helen Garrett
The Mountaintop
1120 South Avenue, D-3
Forest Park, GA 30297**

STAFF RECOMMENDATION FORM

Staff Applicant - Please print out two copies of this form.

Give one to your Pastor and the other to another responsible adult reference who is knowledgeable of your ability to work with youth, in ministry and/or in the specific areas for which you are applying.

Pastor / Reference – Please complete this recommendation form and return to directly to The Mountaintop. *(Do no return to applicant.)*

Applicant's Name

Church Name, City & State

Please read the following before filling out this recommendation:

Serious consideration will be given to your evaluation of the applicant's character, experience and aptitude for camp counseling and / or activity staff at The Mountaintop. Your prompt attention to completing and returning this form is greatly appreciated. Your responses will be held in strict confidence. If you have any questions, please feel free to email: Eandrews1962@yahoo.com or call: 404-934-1753

Your Name:

Email:

Home Phone: ()

Work Phone: ()

Cell Phone: ()

Your relationship to applicant (i.e. pastor, friend, manager):

How long have you known the applicant:

Number of years/months the applicant has been a follower of Jesus:

Is applicant active in his/her church: Yes No

Answer the following to the best of your knowledge:

To your knowledge, does the applicant abuse alcohol, or illegal drugs? Yes No

If so, please explain:

Have you ever had any reason to question the applicants' morals? Yes No

If so, please explain:

Describe your knowledge of the applicant's experience working in a leadership role with youth including strengths and weaknesses: (use back if needed)

Are there any pending issues or concerns you feel should be addressed before putting the applicant in a staff position? Yes No

If so, please explain:

On the basis of the above information, the applicant is:

strongly recommended

recommended

recommended with reservation

not recommended

Signature

Date signed

Please return this form by May 1, 2010 to the following address:

**Helen Garrett
1120 South Avenue, D-3
Forest Park, GA 30297**

**CRIMINAL BACKGROUND CHECK
AUTHORIZATION FORM**
The Mountaintop

To be completed by Applicant over 18 years of age

Name: _____
Last First Middle

Current Address: _____

City/State/Zip: _____

Social Security #: _____ **Date of Birth:** _____

The Mountaintop Camp is requesting your Social Security Number to expedite this criminal background check. Your SSN will only be view by the Camp Operations Manager and Camp Secretary and will not shared with anyone else.

Drivers License #: _____ **State of Issue:** _____

I hereby authorize The Mountaintop (a chartered Generations Camp Ministry Organization) to conduct a criminal background check on me. I understand that this security check will include my criminal history. I hereby release The Mountaintop, its Steering Committee Members and Generations Ministry from any liability resulting from the furnishing of this information. I certify that the statements made on this form are true, complete, and correct to the best of my knowledge, and belief, and are made in good faith.

Signature: _____ **Date:** _____

Please return this form, along with a \$15 check made payable to THE MOUNTAINTOP, by
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