

Camp Kydnie

A special camp for kids with kidney disease

New Staff Application

New staff must be over the age of 18 by the start of camp.

Personal Information

Name: _____ Email Address: _____

Age: _____ Date of Birth(MM/DD/YYYY): _____ Sex: M ___ F ___

Current Address: _____

City: _____ State: _____ Zip Code: _____

Permanent Address: _____

City: _____ State: _____ Zip Code: _____

Current Phone #: _____ Cell Phone #: _____

Valid Driver's License: Y ___ N ___ License #: _____ State: _____

Education Information

Highest grade completed: High School _____ College _____ Graduate School _____

Name of High School: _____ Diploma: Y ___ N ___

Name of College: _____ Year of graduation: _____

Degree Earned: _____ Majors: _____

Name of Graduate School: _____ Year of graduation: _____

Degree Earned: _____ Majors: _____

Camp Experience

Please list all of your prior camp experience, especially involving children. If you have worked at another resident/day camp, please list the name of the camp, your position, and the dates of camp. _____

Other Information

Do you have or know someone who has kidney disease or any other condition, which would enhance your empathy for children with kidney disease? Please explain _____

Do you have any other skills, talents or services related to your occupation, which would enable you to further serve the campers and staff? _____

Please check any activities you have an interest helping with.

Archery	_____	Arts & Crafts	_____	Dance/Drama	_____	Fishing	_____
Hiking	_____	Kidney Education	_____	Group Games	_____	Music	_____
Nature	_____	Sports	_____	Survival Skills	_____	Woodworking	_____

Please use the back of this sheet to tell us about yourself and why you would like to be a part of Camp Kydnie.

Reference Information:

Three reference forms are provided with this application. All three forms must be completed for new applicants and returned to the Camp Kydnie Counselor Coordinator before being considered for selection as camp staff. The Reference Information must be completed by a non-relative that has knowledge of the applicant's character, experience, and ability to serve as a member of camp staff.

Please list those who will provide applicant's references below.

	Name	Address	Phone
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____

Applicants signature: _____ **Date:** _____

Name:

Clothing Size:

Shirt: Adult- S ___ M ___ L ___ XL ___

Pants: Adult- S ___ M ___ L ___ XL ___