



Cocolalla Lake Bible Camp
PO Box 106
Cocolalla, ID 83813
(208) 263-3912
www.clbcamp.org

Dear Potential Staff Member,

Summer is just around the corner! This means that the staff at Cocolalla Lake Bible Camp is gearing up for the summer. We are eager to see how God is going to work this summer as the Gospel of Jesus Christ is proclaimed.

We are excited that you desire to serve this summer at Camp. We are in need of many helpers, and everyone who helps has the privilege of being a part of God's work at Cocolalla. Attached are the Staff Application and reference forms. Please fill these out completely. You will need three references, one being from your **pastor/elder**, and one from your **Youth Leadership Leader**. Please have your references return their forms to Cocolalla Lake Bible Camp (address below) before **June 1st**. This application also needs to be returned to the camp by **June 1st**. After we have received all of your paperwork, we will contact you with information about Staff Training.

Notice:

1. All four weeks of camp starts on Mondays this year instead of Sundays.
2. 7-8 Camp is a day shorter than last year. It's now Monday-Thursday.
3. Each Monday of camp, there will be an all-staff meeting at 2:00pm before registration starts.

Please look at the dates below so you can decide when you would like to serve this summer. If you have any questions, please call the Camp (208-263-3912). We look forward to serving with you this summer!

Your fellow servants of the Gospel,

Dirk Darrow and Tim Coleston

Dates

June 1st	Return Staff Application
June 3-4	Workdays Retreat (Starts at 6pm on the 3 rd , and ends at 4pm on the 4 th)
June 27	Wrangler Training (Starts at 9:45am)
June 27-July 1st	Staff Training (Starts at 5:00pm on the 27 th , ends at 2pm on the 1 st)
July 11-16	Teen Camp (Staff meeting 2pm on the 11 th , and leave at 3pm on the 16 th)
July 18-22	11 & 12 Camp (Staff meeting 2pm on the 18 th , and leave at 3pm on the 22 nd)
July 25-29	9 & 10 Camp (Staff meeting 2pm on the 25 th , and leave at 3pm on the 29 th)
Aug. 1-4	7 & 8 Camp (Staff meeting 2pm on the 1 st , and leave at 3pm on the 4 th)
Aug. 4-5	Staff R&R (Begins at 3pm on the 4 th , and ends at 10am on the 5 th).



Cocolalla Lake Bible Camp

STAFF APPLICATION FORM



Name: _____ Age: _____ Phone#: _____

Mailing Address: _____

Email: _____ Birth date: _____

Occupation: _____ Education Level: _____

Church: _____ Pastor: _____

Are you a member of this church? _____ How long have you attended? _____

T-Shirt Size:

XS S M L XL XXL

Involvement with a Youth Leadership group that partners with CLBC is required.

Which Youth Leadership group have you been attending? _____

What has been your previous kid's camp experience? _____

Please describe your personal testimony of Jesus Christ. _____

Why do you want to volunteer at Cocolalla lake Bible Camp? _____

Please check which camps you would prefer to work at:

Teen Camp 11&12 Camp 9&10 Camp 7&8 Camp

Are you skilled in any of the following?– Horse wrangling, Lifeguarding, Video production, Mountain Biking, Please describe: _____

Have you ever been investigated for, charged with, or convicted of an offense involving child abuse, sexual abuse, and/or substance abuse? _____

If yes, how recent was the offense? _____

-and- what were the results of the investigation and/or charges? _____

REFERENCES: Please list three adults (other than relatives) who can speak of your responsibility, faith, experience, and character. Your **Pastor/Elder** and **Youth Leadership Leader** should be included. If they would rather, they can email us at reference@clbcamp.org and we will send them a link to fill out a reference form online instead of the paper forms attached.

1. Name _____ Phone _____

Address _____

Email _____ Relation _____

2. Name _____ Phone _____

Address _____

Email _____ Relation _____

3. Name _____ Phone _____

Address _____

Email _____ Relation _____

Three personal reference forms have been included. Please hand them to your references with a stamped envelope addressed to **Cocolalla Lake Bible Camp, P.O. Box 106, Cocolalla ID 83813.**

Applicant Signature _____ Date _____

Parent Signature (if under 18) _____ Date _____

Cocolalla Lake Bible Camp is affiliated with *InFaith*



Child Abuse Responsibility

Child abuse is as old as the history of mankind. It has many ugly forms and is a problem of severe magnitude and shocking implications. The spiritual atmosphere which Cocolalla Lake Bible Camp (CLBC) attempts to provide may be one of the best deterrents possible. When, however, an instance of child abuse is suspected or reported, our leadership must do everything it can to help those in need as quickly as possible along the best spiritual and professional guidelines. The CLBC Board of Trustees has prepared and adopted the "Child and Youth Abuse Prevention Program for Cocolalla Lake Bible Camp" which is available in the CLBC office for your review. Any volunteer, prior to receiving authorization from CLBC to serve in the volunteer capacity, must review and agree to comply with the information contained in the aforementioned prevention program. If there is any suspicion of child abuse in any form, it must be reported to the Executive Director, the Assistant Director or any senior leadership person affiliated with Cocolalla Lake Bible Camp in compliance with the prevention program guidelines. The CLBC leadership will comply with the steps contained within the prevention program. I acknowledge my responsibility to be careful and conscientious in reporting any suspicions to the Cocolalla Lake Bible Camp leadership staff.

Applicant's Signature _____

Date _____

Have you ever been convicted of any offense other than minor traffic violation? Yes _____ No _____
If yes, please provide details of the conviction (date, type of conviction, how it was resolved, etc.). Please use additional paper if needed.

I have read and fully understand all questions requested in this application. I certify that all answers given by me are true, accurate and complete. I understand that the completion and/or execution of this application does not insure me a volunteer position, nor does it obligate me or the organization in any way. I fully understand that the omission and/or misrepresentation of facts requested may be cause for immediate dismissal without prior notice. If accepted for service, I agree to abide by all the rules and regulations of the InFaith. I have read, understand, and agree to the above.

Applicant's Signature _____

Date _____

SS# Required for Background Check: _____

Statement of Faith

The ministry of Cocolalla Lake Bible Camp is built upon what we believe, and what we believe is based on the Word of God and our personal faith in Jesus Christ. We hold to the great foundational truths of the historic Christian faith held in common by like-minded evangelical Christians with whom we share both fellowship and the mission mandate.

We believe that there is one God, creator and sustainer of the universe, existing in three persons: Father, Son, and Holy Spirit.

We believe that the Bible is the verbally inspired Word of God, is inerrant in the original manuscripts and uniquely infallible, our only authority for faith and practice.

We believe in the deity of our Lord Jesus Christ, in His virgin birth, in His sinless life, in His miracles, in His substitutionary sacrifice upon the cross, in His bodily resurrection, in His victory over sin and His enemy Satan, in His present exaltation at His Father's right hand, and in His personal return, at any time, in power and great glory.

We believe in the fall and the lostness of man, whose total depravity requires that he be regenerated by the Holy Spirit for his salvation.

We believe that salvation consists of the forgiveness of sins, the imputation of Christ's righteousness, and the gift of eternal life, received by grace through faith alone, entirely apart from works.

We believe in the ministry of the Holy Spirit by whose indwelling the Christian is enabled to live a godly life, and by whom the Church, the Body of Christ, is gifted and equipped to serve and glorify God.

We believe in the bodily resurrection of all mankind: those who have trusted in Christ, the ultimate Judge, will receive everlasting life and blessedness in heaven; those who have not will receive everlasting punishment and separation from the presence of God.

We believe that Christ has commanded His Church to preach the gospel to all people, and that this mandate should be a primary concern of all Christians. I hereby express my agreement with the above Statement of Faith, and declare that all answers on previous pages are correct to the best of my knowledge.

Applicant's Signature _____

Date _____

National Criminal Background Check Cocolalla Lake Bible Camp



The following information will be used to conduct a **national criminal background check**. By providing this information you consent to this review of your background and understand that Cocolalla Lake Bible Camp Inc. may deny you to serve as a volunteer or employee of the church without cause or disclosure of reason.

Candidate Information

Last Name: _____ First Name: _____ M: _____

Social Security #: _____ Driver's License #: _____

Sex: _____ Date of Birth: _____ (mm/dd/yyyy)

Street Address: _____ Apt. # _____

City/ST/Zip: _____

Phone #: _____

The above information and the resulting report are **CONFIDENTIAL** and shall only be disclosed to authorize personnel.

COCOLALLA LAKE BIBLE CAMP INC. ("the Company") may obtain information about you for employment purposes from a third party consumer reporting agency. Thus, you may be the subject of a "consumer report" and/or an "investigative consumer report" which may include information about your character, general reputation, personal characteristics, and/or mode of living, and which can involve personal interviews with sources such as your neighbors, friends, or associates. These reports may contain information regarding your credit history, criminal history, social security verification, motor vehicle records ("driving records"), verification of your education or employment history, or other background checks. Credit history will only be requested where such information is related to the duties and responsibilities of the position for which you are applying. You have the right, upon written request made within a reasonable time after receipt of this notice, to request disclosure of the nature and scope of any investigative consumer report and a copy of any report about you. Please be advised that the nature and scope of the most common form of investigative consumer report obtained with regard to applicants for employment and voluntary service is an investigation into your education and/or employment history conducted by First Advantage Background Services Corp. ("First Advantage"), P.O. Box 105292, Atlanta, GA 30348, 1-800-845-6004. The scope of this notice and authorization is all-encompassing, however, allowing the Company to obtain from any outside organization all manner of consumer reports and investigative consumer reports now and throughout the course of your employment and voluntary service to the extent permitted by law. As a result, you should carefully consider whether to exercise your right to request disclosure of the nature and scope of any investigative consumer report.

ACKNOWLEDGMENT AND AUTHORIZATION I acknowledge receipt of the DISCLOSURE REGARDING BACKGROUND INVESTIGATION and A SUMMARY OF YOUR RIGHTS UNDER THE FAIR CREDIT REPORTING ACT and certify that I have read and understand both of those documents. I hereby authorize the obtaining of "consumer reports" and/or "investigative consumer reports" by the Company at any time after receipt of this authorization and throughout my employment, if applicable. To this end, I hereby authorize, without reservation, any law enforcement agency, administrator, state or federal agency, institution, school or university (public or private), information service bureau, employer, or insurance company to furnish any and all background information requested by First Advantage P.O. Box 105292 Atlanta, GA 30348, 1-800-845-6004, another outside organization acting on behalf of the Company, and/or the Company itself. Their Privacy Policy can be reviewed at <http://www.fadv.com/privacy-policy/>. I agree that a facsimile ("fax"), electronic or photographic copy of this Authorization shall be as valid as the original.

Signature: _____ Date: _____

Print Name: _____



Cocolalla Lake Bible Camp

STAFF HEALTH FORM



Name: _____ Date: _____

Age: _____ Home Phone #: _____

Emergency Contact: _____

Phone: _____ Relation: _____

Please list all food allergies: _____

Please list all medical allergies: _____

What past or present illness(es) or condition(s) should the CLBC medical staff know about? _____

Date of last Physical exam: _____ Tetanus shot: _____

Family Insurance _____ Policy Number: _____

Staff Member signature _____

IMPORTANT! For Staff under 18 years old:

IN CASE OF EMERGENCY, I understand that after every effort is made to contact me and I can't be reached, I hereby give permission to the physician selected by the camp director or nurse to hospitalize secure proper treatment, and to order injection, anesthesia or surgery for my child, as named herein.

Parent/Guardian Signature _____

Date: _____ Phone: _____

SHORT ANSWER

How does the applicant act around his/her peers? _____

Is the applicant discerning in his/her use of humor? _____

How did the applicant do in their Bible reading, prayer, and church involvement this year in YL?
(for Youth Leadership Leaders) _____

Can you comment on the applicant's punctuality? _____

LONG ANSWER

Based on your knowledge of the applicant, what areas do they most need encouragement,
discipleship, or correction? _____

Would you trust the applicant to lead and disciple your children? If no, please explain. _____

Please comment on the applicant's commitment to right living, i.e., consistent Christian
testimony, morality, and honesty. _____

Is there anything in the applicant's life that would cause you not to recommend them for service
at camp? If yes, please explain. _____

Is there anything else (good or bad) you feel would be helpful for us to know if we serve
alongside the applicant this summer? If yes, please explain. _____

Signature: _____ **Date:** _____

Please send back to:
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