



FOR OFFICE USE

Volunteer Ref # _____ Date _____

Volunteer Application Form

Thank you for your interest in volunteering with *Camp High Point*.

Volunteers play a vital role at Camp High Point. All volunteer applications are reviewed with consideration of current volunteer opportunities. The information you provide will be stored in confidence under the provisions of the Data Protection Act. Your completed form will be held securely and confidentially. Only authorized staff will have access to your information.

Personal Details

Name: _____ Mr. Mrs. Miss. Ms.

Postal Address: _____

County: _____

Telephone: (Home) _____ (Mobile) _____

E-Mail: _____

Birth-date: _____
Day / Month / Year

If you are involved with us as a volunteer and an emergency arises, whom should we contact?

Name: _____ Relationship: _____

Telephone: (Home) _____ (Mobile) _____

Equal Opportunities

Camp High Point (Central States Conference) is committed to equal opportunities and all volunteer recruitment decisions will be based on merit, suitability for the role and experience. All volunteer recruitment decisions will not be influenced by race, color, nationality, religion, sex, marital status, family status, sexual orientation, disability, or age. Camp High Point fully endorses a working environment free from discrimination and harassment.

Camp High Point is committed to the standards of excellence in Child Protection practices. As your volunteer role may have direct contact with children, you will be required to complete a Verified Volunteer background check, which will be processed by the human resources department of the Central States Conference. In the mean time, please complete the question below.

Have you ever been convicted of an offence in the United States or elsewhere?

Yes No

If you ticked yes, please provide details below

Your Skills and Interests

1. Have you ever done any voluntary work before? Yes No

If you answered yes, please tell us a little about the experience.

2. Why do you want to volunteer now? What has motivated you to get involved?

3. Do you have any particular skills or qualities that you could use in your voluntary work?

4. Are you applying for a specifically advertised position? Yes No

If yes, please write the following; Role name _____

5. What kind of voluntary work interests you?

- Activities
- Food Services
- Camp Nurse
- Floater
- Tutor
- Other

6. When are you available for voluntary work? Totally Flexible

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Morning							
Afternoon							
Evening							

7. How long do you intend to volunteer for? _____

8. When do you wish to volunteer? _____
(Junior Camp/Teen Camp/Both)

References

1.
Name: _____ Relationship: _____

Place of Work: _____ Position: _____
(If applicable)

Telephone: (Home) _____ (Mobile) _____

E-Mail: _____

2.
Name: _____ Relationship: _____

Place of Work: _____ Position: _____
(If applicable)

Telephone: (Home) _____ (Mobile) _____

E-Mail: _____

If you have any queries when completing this application form, please phone (913)653-4819 or e-mail youthministry@central-states.org. If you would like to find out more about *Camp High Point*, log onto the youth ministry website www.csayya.org.

Is there any additional information you would like to bring to our attention?

I declare that the information I have provided is true. All my actions as a volunteer will reflect the ethos of Educate Together and I agree that being Child Centered will be central to my role.

Signed _____ Date _____

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Notes

Volunteer Position _____

Volunteer Interview _____

Volunteer Role Description sent _____

References Collected _____

Volunteer Start Date _____