



WINTER CAMP 2019



Staff Orientation: 9:00 a.m. Friday, January 18th

Thank you for your interest in Special Days Camps! Winter Campers include cancer patients, cancer survivors, and their siblings. We'll sled, ice skate, make arts and crafts, sing, play games, and have a great time. This winter we'll be holding camp at YMCA Camp Pentalouan, located just north of Muskegon. This packet contains everything you need to apply for a volunteer staff position at Winter Camp 2019 we look forward to hearing from you!

Filling Out the Paperwork

1. **Staff Application:** Please LEGIBLY complete both pages of the Staff Application. Indicate the position you are applying for in the appropriate section of the application. NEW APPLICANTS: you **must** completely fill out the information in the "References" section on page 2 of the application and answer the questions midway down the page.
2. **Criminal History Check:** It is the policy of Special Days Camps to conduct criminal history checks on all applicants.
3. **Reference Request Form:** Please fill in YOUR name at the top of **3** reference request forms (one form is enclosed) and give to non-relatives to complete and return. LICENSING REQUIRES THREE POSITIVE REFERENCE STATEMENTS BE ON FILE FOR EACH STAFF MEMBER BEFORE ASSIGNMENTS ARE MADE.
4. **Staff Conduct and Rules:** Please familiarize yourself with Special Days Camps policies and rules and sign the back of the form to indicate your willingness to abide by and enforce them.
5. **Liability and Image Release:** Special Days Camps requires everyone attending to sign a liability and image release. Please read the form carefully and sign the bottom.
6. **Staff Health History Record:** We realize that some information (medications being taken) may change between now and camp time. Please complete the form as accurately as possible, you will have an opportunity at camp to update your health form if necessary.

Application Deadline, Selection and Staff Orientation:

In order to receive preference for staff position, all paperwork and references must be turned in or postmarked by December 31, 2018. All other factors being equal, positions will be given to applications received on or before the deadline. Applications received after December 31st will be considered based on open positions. **A MANDATORY STAFF ORIENTATION WILL BE HELD AT CAMP ON FRIDAY, JANUARY 18th at 9am.** A limited number of beds are available on Thursday, January 17th. You **MUST** make a reservation to arrive at camp on Thursday. Reservations may be made by contacting tammy.willis@specialdays.org.

Contact Information

Please mail paperwork to:
Special Days Camps
P.O. Box 436
Dimondale, MI 48821

E-mail: tammy.willis@specialdays.org
Website: www.specialdays.camp

Special Days Camps

CAMP POSITIONS

Teen or Youth Camp Coordinator	Teen Camp Coordinator: responsible for supervising Voyager, Trailblazer, and Outback villages. Youth Camp Coordinator: responsible for supervising All Star, Explorer, and Adventurer villages.
Administrative Coordinator	Administrative Coordinator: responsible for assisting Camp Director with all administrative tasks related to the camp session.
Program Team / Coordinator	Provides assistance in planning, coordinating, and leading programs and activities. Coordinator supervises the 4-5 members of the Program Team and the Arts & Crafts Director.
Tech Team Member / Coordinator	Work as a member of a team to produce a camp newsletter, end of camp presentation for closing ceremonies and any audio-visual needs for programming. Coordinator will supervise the 2-3 members of the team.
Arts & Crafts Director	Responsible for arts & crafts program and projects for ages 5 - 17. Supervises arts & crafts staff. Must be creative, organized, flexible, and enthusiastic!
Arts and Crafts Staff	Assists in the arts & crafts program. Must be able to work with campers ages 5 -17 and supervise their projects. Organization and patience is a must.
All Star Village Director	Responsible for the village program activities and schedule. Supervises up to 21 campers ages 5-7 and 4-6 cabin leaders. Village theme is "Friendship"; must be nurturing and selfless.
Explorer Village Director	Responsible for village program activities and schedule. Supervises up to 25 campers ages 8-9 and 4-6 cabin leaders. Village theme is "Enthusiasm"; must have extreme patience and energy.
Adventurer Village Director	Responsible for village program activities and schedule. Supervises up to 29 campers ages 10-11 and 6-8 cabin leaders. Village theme is "Responsibility"; must be highly energetic.
Adventurer Village Director	Responsible for village program activities and schedule. Supervises up to 29 campers ages 12-13 and 6-8 cabin leaders. Village theme is "Respect"; must be highly energetic.
Trailblazer Village Director	Responsible for village program activities and schedule. Supervises up to 38 campers ages 14-15 and 6-8 cabin leaders. Village theme is "Teamwork"; must be able to positively motivate others.
Outback Village Director	Responsible for village program activities and schedule. Supervises up to 20 campers ages 16-17 and two cabin leaders. Village theme is "Leadership"; must be an exemplary leader.
Cabin Leader	Responsible for the safety, welfare, and most of all, the fun of campers. Helps lead program activities. Must be 19 years or older and be willing to do whatever it takes!
Medical Staff	Meets medical needs of campers and staff.
Transportation	Provides in-camp transportation for campers during Special Days week. Must be able to safely operate a 4 wheeler or golf cart, and safely drive after dark.

SPECIAL DAYS CAMPS - Winter Camp 2019- New Staff Application

Print or type your name	Date of birth	Gender	Tee Shirt Size
Address you would like to have mail sent to: City		State	Zip (Area Code) Phone
E-mail address	Send camp info via e-mail? <input type="checkbox"/> Yes <input type="checkbox"/> No	Best time and number to call	Cell Phone (area Code) Phone
Would you like to arrive on Thursday, Jan 17th? Yes		No	

STAFF MEMBERS MUST ATTEND ORIENTATION AT CAMP ON FRIDAY JANUARY 19TH AT 9AM.

Position desired (check one) :

- Village Director: (circle one) All Star (5-7 yrs) Explorer (8-9 yrs) Adventurer (10-11 yrs) Voyager (12-13 yrs) Trailblazer (14-15 yrs) Outback (16-17 yrs)
- Coordinator: (circle one) Youth Camp Teen Camp Administrative Tech Team
- Program Staff
- Cabin Leader (Must be 19 years or older OR have successfully completed the summer SIT program)
Age preference: 5-7 yrs 8-9 yrs 10-11 yrs 12-13 yrs. 14-15 yrs 16-17 yrs none
- Arts & Crafts Director Arts & Crafts Staff Tech Team
- Medical Staff Camp Photographer Transportation

Camp Experience: List camps where you have been a camper or a staff member.

Name of camp	Year(s)	Title/Responsibilities
Name of camp	Year(s)	Title/Responsibilities
List any current certifications (First Aid, CPR, WSI Life Guard, etc.)		

Education:

High School	Year of graduation	Major academic interests
College/Secondary School	Year of graduation	Major academic interests

Job Experience: please include full or part time jobs and any volunteer work.

Present Employer	Title/Duties
Street Address, City, State, Zip Code	
(Area Code) Phone number	
Past Employer	Title/Duties
Street Address, City, State, Zip Code	
(Area Code) Phone number	

Have you ever been convicted of anything other than a minor traffic violation? Yes No
If yes, explain:

Are there any felony charges pending against you? Yes No
(Note: prior to selection a criminal record check is required)

References: Please list (3) employers, supervisors, or adults who know you well. Do not list relatives or SPECIAL DAYS Camps personnel. **Please provide Special Days Camps "Reference Request Form" to these individuals to complete and return.** References must be on file prior to the first day of camp.

Name	Name	Name
Address	Address	Address
City/State/Zip	City/State/Zip	City/State/Zip
(Area Code) Phone number	(Area Code) Phone number	(Area Code) Phone number
Relationship	Relationship	Relationship

Emergency Contact: Please list names, phone numbers and relationship of person to notify in case of emergency.		
Name	(Area Code) Phone number	Relationship
Name	(Area Code) Phone number	Relationship

Please use a separate piece of paper to answer the following questions.

1. How did you hear of Special Days Camps?
2. Why do you want to be a staff member at Special Days Camps?
3. What specific qualities do you feel makes a staff member successful?
4. Why would *you* be a great staff member for Special Days Camps?
(Include unique abilities or skills you have to offer.)

Please return completed application to:

Special Days Camps
 PO Box 436
 Dimondale, MI 48821

 Signature

 Date

Questions? Contact Tammy Willis, Camp Director
Phone: (866) 448-4710 E-mail: tammy.willis@specialdays.org
Visit our web site at www.specialdays.camp



SPECIAL DAYS CAMPS

P.O. Box 436
Dimondale, MI 48821
(866) 448-4710

**CRIMINAL HISTORY CHECK
MICHIGAN STATE POLICE
CRIMINAL JUSTICE INFORMATION CENTER**

As a present or prospective volunteer/employee of Special Days Camps, I understand that it is part of Special Days Camps' policy to secure criminal history information as part of the screening process using the information provided below.

Please print legibly.

Name _____
Last First Middle

Maiden name or names previously used _____

Birth date _____ Gender _____ Race _____
Month/date/year

Social Security Number _____

Driver's License Number _____ State _____

I understand that the above information is required by the Criminal Justice Information Center of the Michigan State Police, Lansing, Michigan. I authorize Special Days Camps to utilize the above information for the sole purpose of obtaining a criminal history file search.

Signature

Date

SPECIAL DAYS CAMPS

Reference Request

_____ has given your name as a reference for a
(Applicant name)
position as a cabin leader/staff member for SPECIAL DAYS CAMPS, a camp for children living with cancer.

It is important that he/she enjoys and understands young people, works well with adults, has a strong sense of responsibility and an enthusiastic attitude. The task of selecting the right person for such an important position is difficult and we would appreciate you analyzing the above applicant carefully. Your statements regarding the applicant will be considered confidential.

The applicant must have three references on file in order to be eligible for selection.

Please send this entire Reference Request as promptly as possible to:

Special Days Camps

P.O. Box 436

Dimondale, MI 48821

Thank you for your time and assistance.

Your Name: _____

Position / Title: _____

Address: _____

Phone Number: (_____) _____

Date: _____

Under each general heading, check the phrase that most accurately describes the applicant's HABITUAL behavior.

1. How well is the applicant able to direct and influence others along definite lines of action?

- Poor leader; incapable of directing and controlling others
- Usually follows the lead of others
- Normally successful in directing and controlling others
- Very successful in leading others
- Exceptional leader; inspires others along desirable lines of action

Additional Comments:

2. How well does the individual work with associates and others for the good of the group?

- Cooperates grudgingly; makes trouble; obstructionist
- Gives limited cooperation; neglects common good for own interest
- Cooperates with others toward accomplishment of a common goal
- Cooperates willingly and actively regardless of self benefit; makes things go smoothly
- Exceptionally successful in working with others and inspiring confidence

Additional Comments:

3. How does this person react to suggestions or criticism by others?

- Takes criticism as a personal insult
- Resents suggestions
- Listens to suggestions but may act without considering them
- Follows suggestions willingly
- Asks for criticism and suggestions

Additional Comments:

4. How responsible is the applicant? How able is the applicant to competently get things done on his/her own?

- Irresponsible even under supervision
- With constant supervision will do satisfactory work
- Usually needs detailed instructions with regular checks of work
- Carries out routine activities on his/her own
- Exceptionally able to accomplish work without close supervision

Additional Comments:

5. How well does this person apply energy and persistence in following a job through?

- Rather indifferent; does not finish work
- Needs much prodding to complete work
- Completes assigned tasks of his/her own accord
- Industrious, energetic, dependable at all times
- Unusual perseverance; does more than expected

Additional Comments:

6. How well does this person adapt to sudden changes in plans?

- Panics when faced with unexpected change
- Is frustrated by change, needs to be directed
- Is uncomfortable with change, but adapts assertively and quickly
- Accepts change calmly and reacts with confidence
- Has an exceptional degree of flexibility and can adapt without the need of supervision

Additional Comments:

7. How long have you known the applicant?

In what capacity?

8. Please comment on this individual's suitability to work with children ages 5-17. Would you select him/her to work with your child?

9. What is this applicant's strongest asset? Does he/she have any special talents or abilities?

10. Are there any weaknesses that he/she has that might affect his/her performance in a cabin leader/staff position?

Any additional comments:

Thank you!

SPECIAL DAYS CAMPS: Staff Conduct and Rules

Because we are the adults responsible for the campers' supervision, it is expected that we all maintain an **exemplary** standard of behavior. We have only one set of standards at camp that applies to campers and adults alike. Please read this form carefully; **your signature indicates your willingness to abide by and enforce all listed and stated policies and rules.** Staff who are unable or unwilling to abide by camp rules may be given one written warning before they are asked to leave camp. However, some infractions will result in immediate dismissal from camp.

1. **SMOKING** – Smoking or the use of tobacco products not permitted on camp property. Use or possession of any tobacco product will be cause for immediate dismissal from camp.
2. **ALCOHOL/ILLEGAL DRUGS** – Use, possession, or being under the influence of alcohol or illegal drugs is prohibited and will be cause for immediate dismissal from camp.
3. **WEAPONS/FIREARMS**- Possession of any type of weapon or firearm is prohibited and will be cause for immediate dismissal from camp.
4. **MEDICATIONS**- ALL medications (camper and staff) will be turned in to the medical staff. No medications, including over the counter medication (i.e. aspirin, vitamins, cough drops etc.), will be left in the sleeping areas. Failure to abide by this policy may result in dismissal from camp.
5. **PREMISES** - Staff will not leave the property or an off-site activity without the permission of the camp director.
6. **PERSONAL APPEARANCE** - Appropriate clothing and shoes will be worn at all times. Clothing (including hats) should be free of references to alcohol, drugs, sex, tobacco, vulgarity or violence. Clothing should be modest in appearance, especially swim wear. Female staff are asked to wear modest bathing suits. Males with long hair will pull it back or wear it under a hat at all times. Extreme body art and/or tattoos are unacceptable. Body piercing jewelry will be removed for the duration of the session. Overall personal appearance will be acceptably clean, neat and orderly.
7. **PROFANITY/VULGARITY**- The use of profanity, vulgarity or foul language by staff or campers is inappropriate and unacceptable.
8. **CURFEW** – Age appropriate curfews have been established for campers. Staff will enforce camper curfews and adhere to a staff curfew of midnight.
9. **GOLF CARTS, FOUR WHEELER, SNOWMOBILES** - These vehicles are for the transportation of campers and/or staff with mobility problems and/or equipment. At NO time should a camper or staff member be riding these vehicles without permission of the camp director or medical staff director.

10. **SLEEPING AREAS** – Campers and staff are allowed only in the sleeping area to which they are assigned. A camper MAY NOT change his/her housing assignment without the consent of the camp director. A cabin leader (counselor) will be present at all times when there is a camper present, regardless of the age of camper. NO camper will be left alone or unattended at any time.
11. **PARTICIPATION** – Staff will participate in ALL activities with their campers including songs at mealtimes and campfires, swimming, group games, etc. All activities are mandatory, including flag ceremony, meals and evening activity. Staff are to know the whereabouts of each of their campers at ALL times.
12. **PUNCTUALITY** – Staff and campers will be at all scheduled activities including flag ceremony and meals on time.
13. **CAMPER MED CALL**- Staff will make sure campers report to the medical center as directed by the medical staff.
14. **MONEY** - All money and valuables should be deposited into the camp bank or left with the camp director. Money and/or valuables left in the sleeping areas will not be the responsibility of SPECIAL DAYS Camps.
15. **RELATIONSHIPS & SEXUAL HARASSMENT** - All staff will maintain friendly, supportive and professional relationships with campers and other staff. Fraternalization between staff and campers is inappropriate and cause for dismissal. Special Days Camps will not tolerate sexual harassment in any form. Any instance of such behavior from a staff member will be cause for immediate dismissal.
16. **TELEPHONES** – Phones (including pay phones and cell phones) are for staff use only; campers may only use a phone in emergency situations with permission from the camp director. **Staff are not to carry cell phone without approval from the Camp Director. Campers are not able to carry cell phones and we ask that you set the example for them. Please pack a watch, camera and alarm clock as using your cell phone for any of these reasons will not be permitted.**
17. **PROPERTY DAMAGE** – Staff will inform the camp director immediately of any property damage including graffiti. The individual(s) responsible for the damage will be charged accordingly.
18. **RAIDING**- Under no circumstances is raiding allowed. This includes but is not limited to toilet papering, use of shaving cream or soap, knocking on windows and doors, or anything that is harmful or destructive. Camp pranks will be “undone” by the individual(s) responsible for them.

The above statements are not intended to be all-inclusive. Professional appearance, behavior, and judgment will be maintained at all times.

(Signature)

(Date)

(Print name)

SPECIAL DAYS CAMPS: Staff Health History Record

Name _____ Birthdate _____ Gender _____
 Last First MI mm/dd/yy

Address _____
 Number and street City State Zip Code

Telephone (_____) _____ Camp Position _____

MEDICATIONS NEEDED OR USED

Name of Medication	Frequency	Dosage	Currently Taken?
			____ Yes ____ No
			____ Yes ____ No
			____ Yes ____ No

Please list special conditions such as ALLERGIES (Food, Penicillin, other):

Dietary restrictions:

Do you carry an infectious disease? ____ Yes ____ No (If yes, explain)

Are you currently infected with TB (Tuberculosis)? ____ Yes ____ No

Do you have any activity restrictions (because of physical defect or illness)? ____ Yes ____ No
 If yes explain degree of restriction, use back if necessary:

I authorize the medical/nursing staff of Special Days Camps to consent to emergency medical or surgical treatment on my behalf and to routine, non-surgical medical care, and to administer routine and other medication as needed.

I certify the information on this form to be true, to the best of my knowledge.

Signature _____ Date _____

**CONSENT FOR CAMP ATTENDANCE, RELEASE OF LIABILITY
AND IMAGE RELEASE**

In consideration of YMCA Camp Pentalouan and Special Days Camps I take full responsibility for my personal safety as it related to attending camp on the property of YMCA Camp Pentalouan, I agree to the following:

1. I hereby acknowledge that there may be physical injury risks associated to attending SPECIAL DAYS Camps at YMCA Camp Pentalouan.

2. I release YMCA Camp Pentalouan, and Special Days Camps, their officers, agents, employees, and volunteer staff from any liability and injuries I may receive as a result of volunteering

3. I release YMCA Camp Pentalouan, and Special Days Camps, their officers, agents, employees, and volunteer staff from any liability and injuries I may receive as a result receiving professional medical care from doctors or nurses furnished by the organization called SPECIAL DAYS Camps.

MULTIPLE ACTIVITY RELEASE

I hereby understand that I will be asked to participate in all activities at SPECIAL DAYS Camps. I release YMCA Camp Pentalouan and SPECIAL DAYS Camps from any and all liability which may result from these activities.

OFF-SITE ACTIVITY RELEASE

I hereby release YMCA Camp Pentalouan and SPECIAL DAYS Camps, their officers, agents, employees, and volunteer staff from any liability for injuries I may receive as a result of participation in an off-site activity as part of camp activities which may include but is not limited to: camping, boating, an amusement park, visiting a city, a major or minor league baseball game, roller-skating, bowling, airplane ride, etc.

IMAGE RELEASE

I hereby give SPECIAL DAYS Camps the absolute right and permission to copyright, publish, and / or resell image likenesses of myself, in which I may be included in whole or in part, for any lawful purpose whatsoever including internet publishing.

I hereby waive any right that I may have to inspect and / or approve the finished product or the use to which it may be applied.

I hereby release, discharge and agree to save same from any liability by virtue of any blurring, distortion, alteration, optical illusion or in any composite form, whether intentional or otherwise, that may occur or be produced in the taking of such picture or in any processing tending towards the completion of the finished product.

ACKNOWLEDGEMENT OF HEALTH INSURANCE

I hereby acknowledge that I am responsible for providing my own health insurance. I further acknowledge that it is my responsibility to have a personal health insurance policy, to pay for temporary insurance or to be solely responsible for all expenses related to any injuries. Under no circumstances will Special Days Camps be expected to pay for any expenses.

I hereby release YMCA Camp Pentalouan and SPECIAL DAYS Camps, their officers, agents, employees, from any financial liability for injuries I may receive as a result of volunteering which includes but is not limited to any health care or emergency services costs.

Staff Name (Please Print)

Signature

Date