

Basic Information

NAME: _____ GENDER: M / F BIRTHDAY: _____

PHONE NUMBER: _____ EMAIL ADDRESS: _____

MAILING ADDRESS: _____ CITY: _____ STATE: _____ ZIP _____

EMERGENCY CONTACT NAME: _____ RELATIONSHIP _____

HOME PHONE: _____ CELL PHONE: _____ WORK PHONE _____

HAVE YOU EVER WORKED AT RIVERVIEW? Y / N WHEN? _____

Personal References

PLEASE MAKE TWO COPIES OF PAGES 5 AND 6 (REFERENCE FORM) AND SEND TO TWO REFERENCES. TO BE RETURNED IN TWO WEEKS. ONE MUST BE A PASTOR OR SPIRITUAL LEADER. THE OTHER MUST BE A TEACHER OR OTHER ADULT MENTOR. PLEASE ALSO INCLUDE CONTACT INFORMATION FOR THE TWO YOU SEND THE REFERENCE SHEETS TO.

1) PASTOR/SPIRITUAL LEADER NAME _____

PHONE NUMBER: _____ EMAIL ADDRESS _____

MAILING ADDRESS: _____ CITY _____ STATE _____ ZIP _____

2) TEACHER/ADULT MENTOR _____

PHONE NUMBER: _____ EMAIL ADDRESS _____

MAILING ADDRESS _____ CITY _____ STATE _____ ZIP _____

Availability

WHAT DATES ARE YOU AVAILABLE TO WORK? _____ TO _____

ARE YOU WILLING TO WORK LATE INTO THE NIGHT IF NECESSARY? Y / N

ARE YOU WILLING TO WORK MORE THAN 40 HOURS A WEEK IF NECESSARY? Y / N

ARE YOU WILLING TO COME BACK TO RIVERVIEW ON AN "AS NEEDED" VOLUNTEER BASIS? Y / N

Personal Testimony

PLEASE BRIEFLY ANSWER THE FOLLOWING QUESTIONS. THESE HELP US GET A SENSE OF WHERE YOU ARE IN YOUR SPIRITUAL JOURNEY.

WHAT CHURCH DO YOU ATTEND? _____

DO YOU ATTEND REGULARLY? _____

BRIEFLY DESCRIBE YOUR INVOLVEMENT IN YOUR CHURCH: _____

DO YOU ATTEND A YOUTH GROUP/SMALL GROUP? Y / N WHERE? _____

PLEASE DESCRIBE HOW JESUS CHRIST BECAME PERSONAL TO YOU, HOW SOMEONE BECOMES A CHRISTIAN, AND WHAT IT MEANS TO BE A CHRISTIAN. PLEASE USE SCRIPTURE REFERENCES IN YOUR RESPONSE.

WHAT DO YOU DO TO GROW DEEPER IN THIS RELATIONSHIP? PERSONALLY? COMMUNALLY?

HAVE YOU EVER BEEN IN A LEADER/DISCIPLESHIP POSITION? BRIEFLY DESCRIBE.

WHAT DOES THE WORD "GOSPEL" MEAN TO YOU?

WHAT DOES THE WORD "DISCIPLE" MEAN TO YOU?

DESCRIBE WHAT IT MEANS TO YOU TO "LIVE DANGEROUSLY"

General Info

PLEASE BRIEFLY ANSWER THE FOLLOWING QUESTIONS. THESE HELP US GET A SENSE OF WHO YOU ARE AS A PERSON.

DESCRIBE YOURSELF AS BEST YOU CAN IN ONE WORD: _____

DO YOU CONSIDER YOURSELF TO BE A MORNING PERSON? NIGHT OWL? _____

ABOUT HOW MANY HOURS A DAY DO YOU SPEND DOING THE FOLLOWING ACTIVITIES?

- SPORTS _____
- HOMEWORK _____
- OUTDOOR ACTIVITIES (YARDWORK, RECREATION) _____
- VIDEO/COMPUTER GAMING _____
- SOCIAL NETWORKING/BLOG SITES _____
- EMAIL/SKYPING/TEXTING _____
- TELEVISION/MOVIES _____
- READING _____

DO YOU HAVE A PERSONAL WEBSITE OR BLOG? PLEASE INCLUDE THE URL _____

WHAT ARE YOUR THREE FAVORITE MOVIES? _____

WHAT TYPE OF MUSIC DO YOU MOST LISTEN TO? USE SPECIFIC ARTISTS AND GENRES.

WHAT DO YOU THINK ARE YOUR TWO BIGGEST STRENGTHS?

TWO BIGGEST WEAKNESSES?

WHERE DO YOU ATTEND SCHOOL? YEAR? IF YOU ARE NOT IN SCHOOL, WHAT DO YOU DO?

SUMMER STAFF IS A LEADERSHIP POSITION WHICH ALLOWS YOU TO MENTOR STUDENTS AND PEERS ALIKE. BECAUSE OF THIS, WE BELIEVE OUR STAFF SHOULD BE EXEMPLARY CHARACTERS. HAVE YOU EVER SUFFERED FROM AN IMMORAL ADDICTION? (I.E. SEXUAL IMMORALITY, DRUG ABUSE, DRINKING, ETC). IF YES, PLEASE EXPLAIN. (NOTE: ANSWERING YES TO THE ABOVE QUESTION DOES NOT NECESSARILY DISQUALIFY YOU FROM A STAFF POSITION AT RIVERVIEW)

Camp Info

PLEASE BRIEFLY ANSWER THE FOLLOWING QUESTIONS. THESE HELP US TO KNOW WHAT YOUR EXPECTATIONS ARE FOR THE SUMMER.

HOW DID YOU HEAR ABOUT RIVERVIEW?

WHY DID YOU CHOOSE TO APPLY TO RIVERVIEW?

WHAT DO YOU EXPECT TO LEARN FROM WORKING AT A SUMMER CAMP?

WHAT DOES "HARD WORK" MEAN TO YOU?

HAVE YOU WORKED AT ANOTHER CAMP/MINISTRY?

DO YOU HAVE ANY SPECIAL SKILLS THAT WOULD BE USEFUL TO CAMP MINISTRY? (BELAYING, LIFEGUARDING, PAINTBALL, ARCHERY, ETC)

IS THERE ANYTHING ELSE YOU WOULD LIKE US TO KNOW AS WE CONSIDER YOUR APPLICATION?

Return To:
Summer Staff Applications at:
Riverview Bible Camp
408771 SR 20
Cusick, WA 99119
(509)482-7390 (fax)
Riverview Bible Camp

Recommendation for Summer Staff Position At Riverview Bible Camp

To be completed by A Christian Worker (Pastor, Youth Pastor, Christian Group Leader)

This section to be completed by applicant:

Applicant's Name _____ Phone Number _____
Address _____ City _____ State _____ Zip _____
email _____

The above named person is applying for a summer staffing position at Riverview Bible Camp. The personal information requested below will supplement information provided by personal interview. It is of great importance to us to obtain objective and valid statements from persons who have some personal knowledge of the applicant's ability and characteristics. The speedy return of this form will be appreciated as it will expedite the processing of this candidate's application. Any information which you may give us will be regarded as strictly confidential. Please send this form directly to Riverview Bible Camp.

1. How long have you known the applicant? _____ In what capacity?

2. Is the applicant a Christian? _____ For approximately how long?

3. Does the applicant appear to be growing in his/her Christian experience?

Please explain.

4. Does the applicant take an active interest in Christian service? _____
Please explain.

5. Have you seen the applicant in response to understanding the Scriptures, witnessing, and prayer life?

6. Please indicate which statement on the following page best describes the applicant in relation to each characteristic listed by writing either a :1- Most of the time, 2-Some of the time, 3-Not often, 4 Hardly ever.

Able to follow instructions _____
Loyal _____
Outgoing and friendly _____

- An able leader of others..... _____
- Consistent in Christian testimony..... _____
- Disciplined in personal habits..... _____
- Enthusiastic _____
- Able to adjust to different situations..... _____
- Able to cope with other's problems _____
- Easily offended..... _____
- Inclined to criticize others _____
- Moody _____
- Able to work without close supervision _____
- Able to work in a team situation..... _____

7. Please grade the applicant on the following characteristics and traits. Use "1" to indicate superior, "2" for above average, "3" if average, and "4" if weak in that area. Please evaluate the applicant in relationship to his/her own age group.

- | | | |
|--------------------------|------------------------------|-------------------------------------|
| ____ Positive Role Model | ____ Sense of Humor | ____ Willingness |
| ____ Tact | ____ Initiative | ____ Attitude toward authority |
| ____ Dependability | ____ Courtesy | ____ Attitude toward hard work |
| ____ Judgment | ____ Initial Impression | ____ Public speaking ability |
| ____ Punctuality | ____ Ability to make friends | ____ Honesty and personal integrity |

8. Please list one strength and one weakness of the applicant:

9. Please check your choice of recommendation:

- | | |
|-----------------------------------------------|------------------------------------------------------------|
| <input type="checkbox"/> I strongly recommend | <input type="checkbox"/> I recommend with some reservation |
| <input type="checkbox"/> I recommend | <input type="checkbox"/> I do not recommend |

Your Name (please print) _____

Date _____

Email _____

Address _____

Position/Organization _____

Phone _____

Signature _____

Thank you for your assistance!