

Dear Veteran Summer Staff,

The Brethren Retreat is a great place to serve the Lord while being challenged to grow closer in your own relationship with God. I hope that you will prayerfully consider what your role might be on staff for Camp Shipshewana 2018. I am looking forward to seeing how God brings together a team of young men and women who love the Lord and desire to serve Him by sharing their lives with hundreds of children during our 98th summer of ministry. Our Camp Shipshewana 2018 theme is: "HIDDEN TREASURES".



Our theme verse is:

"Christ, in whom are found the hidden treasures of wisdom and knowledge Colossians 2:3

Please fill out and return the enclosed staff application ASAP to begin the process. In the past we have accepted applications up to the date of Staff Training, which is June 10-15, 2018 provided there still remains an open position. This has not been the case in recent years. So... get your application materials submitted promptly. We are expecting an abundance of excellent ministry applicants for Camp Shipshewana 2018!

We are searching for Activity Directors in Crafts, Media, Recreation, Waterfront, Worship, and CIT (Counselor In-Training) along with 5 female and 3 male Sr. Counselors. I encourage you to return your application by **April 30**th to allow time to complete the application process.

Also enclosed are three reference forms. Please give these reference forms, along with a stamped Brethren Retreat-addressed envelope, to adults who know you well, and with whom you have had regular contact in a character developing role (i.e. a teacher/professor, coach/supervisor, youth/campus pastor, non-relative adult who has known you 3+ years, etc.). One reference form MUST be from your current Pastor/Youth Leader. Please ask them to complete and return the reference forms to the Brethren Retreat within the week that you present the reference to them. I look forward to receiving your application.

I pray that you are able to help us unravel the mystery of God as we search for wisdom and knowledge this summer found in Jesus Christ!

Seeking Hidden Treasures

Colossians 2:3

Rick Miller Executive Director Winter/Spring 2018

Application for Ministry THE BRETHREN RETREAT

at Shipshewana Lake

Veteran Summer Staff Application 2018 Camp Shipshewana Programs

9095 W CR 275 N / Shipshewana, IN 46565

Phone: 260.768.4519 / Fax: 260.768.4615 / E-mail: campshipshewana@gmail.com

red:Sex: M F Age:
Sex: M F Age: Education Level: City/St/Zip:E-Mail: City/St/Zip: od until: T-Shirt Size: S M L XL XXL
City/St/Zip: ood until: E-Mail: City/St/Zip: od until: T-Shirt Size: S M L XL XXL
City/St/Zip: ood until: E-Mail: City/St/Zip: od until: T-Shirt Size: S M L XL XXL
City/St/Zip: od until:
City/St/Zip: od until:
od until: T-Shirt Size: S M L XL XXL Web Address:
Web Address:

Vehicle Vear/Model/Color:
Vehicle Year/Model/Color: record of vehicles being parked on the grounds by the staff.
Pastor:
City/St/Zip: c: E-Mail:
:: E-Mail:
Phone:
Dates of employment:

PLEASE ANSWER THE FOLLOWING ON A SEPARATE PIECE OF PAPER (hand written or typed):

- Why do you wish to serve for another summer at the Brethren Retreat?
- What single most skill(s) or experience did you gain as a Brethren Retreat staff member that has benefited you in the past year?
- As a returning staff member, how could you improve on your past service at the Brethren Retreat?
- Name an instance in which you were disappointed with your Camp Shipshewana experience.

- Describe a time in which you were disappointed with your work as a Camp Shipshewana counselor.
- Give specific examples of how your relationship with God has changed (i.e. strengthened, stagnated, or digressed) and how you have applied the Bible to obtain direction in your life in the last 12 months.
- In what capacity are you involved with a local church?
- Please describe your involvement as a leader or participant in Christian ministry since you last served at the Brethren Retreat.

GENERAL INFORMATION / TRAINING			
Do you have any physical, medical, or mental health co exercise, stamina, addictions, and prescription medicati	ons) YES (Circle	y special limita NO e one)	tions (diet,
Physician:		e:	
Are you certified in any of the following areas? Lifeguard: Water Safety Instructor (WSI): Archery: First Aid/CPR: AED Defib: Emergency Medical Technician (EMT): Nursing (LPN or RN): Chauffeur's License: Challenge Course Training Certification (CCTC): Would you be willing or interested in being certified in all Lifeguarding Water Safety Instructor (WSI) Archery	YES	NO N	Exp. Date
Have you ever been arrested for any violation that recontest, probation, community service, summary reporthan minor traffic violations)? Also, do you have any prinvestigation? If yes, explain fully on a separate piece of the following items of the foll	rt, or some of ending charge f paper. (C sive behavior?	ther form of a es or are you ircle) YES	djudication (other under any type of NO

PERSONAL REFERENCES

Please complete three references utilizing the forms enclosed on the online link.

In addition, please list two adult references that have known you for 3+ years, <u>excluding family</u>, for follow up should the need arise.

Name:	Relationship:	
Address:	City:	
State/Zip:	City:Phone/e-mail:	
Name:	Relationship:	
Address:	City:	
State/Zip:	City:Phone/e-mail:	
Will you need time off at any	oint during the summer? If so, what are the dates?	
	APPLICANT AGREEMENT AND RELEASE	
circumstances, disqualify me understand Criminal and Chil the Brethren Retreat Staff Te dismissal. To the extent of my	e of a record of criminal activity or child abuse may, depending on the from consideration as an applicant to the Brethren Retreat Staff Team. I fur Abuse background checks may be conducted if I am accepted as a mem. Failure to fully disclose one's record will typically result in immediate knowledge, the information on this application is truthful and accurate. By ize the Brethren Retreat to make inquires about me with the people listed	nber of y
Signature:	Date:	

Return completed application to:

The Brethren Retreat at Shipshewana Lake

(Circle one)

NO

Do you wish to seek out the potential for scholarship funds via your college?

YES

Rick Miller, Executive Director 9095 W 275 N * Shipshewana, IN 46565



Following is a copy of the Reference Form. You will need 3 of these Reference Forms in order for your application to be considered complete. Please give these reference forms along with a stamped Brethren Retreat - addressed envelop to adults who know you well, and with whom you have had regular contact in a developing (i.e. teacher/professor. character role a coach/supervisor, youth/campus pastor, non-relative adult who has known you 3+years, etc.). One reference form MUST be from your current Pastor/Youth Leader. Please ask them to complete and return them to the Brethren Retreat within the week that you present the reference to them.

Below is a link you can email to your references for them to fill out and submit the reference form online. Just have them copy and paste it into their web browser. The link is also on the Brethren Retreat website.

Summer Staff Online Reference Link:

https://docs.google.com/spreadsheet/embeddedform?formkey=dGpscGRlcWt 1MVdpRldRQzVwaEV2bUE6MQ



CONFIDENTIAL REFERENCE FORM CONFIDENTIAL

The Brethren Retreat * 9095 W 275 N * Shipshewana, IN 46565 260.768.4519 * brcship@juno.com * www.brethrenretreat.org

		· · · · · · · · · · · · · · · · · · ·	
City, State, Zip:			
POSITION:	Activity Director	Sr Counselor	
applicant. The infor	rmation that you give will b forward answers to help u	or summer staff, we are seeking information concerning the above treated in the strictest of confidence. Therefore, we would see ensure we are providing responsible staff that exhibit qualities of en entrusted to us. Thank You!	
How long have you	ı known this applicant?		
YES NO NO	, , , , , , , , , , , , , , , , , , , ,		
YES NO			
How well does the	applicant get along with o	thers of the same sex?	
How well does the	applicant get along with o	thers of the opposite sex?	
child abuse, sexual		e that has not been annulled by a court, including but not limited to ornography? If yes, please specify the nature of the crime, date of n.	
Based upon your o		low the 3 strongest and 3 weakest characteristics concerning the life	
Three Strongest Cl	haracteristics	Three Weakest Characteristics	
		<u> </u>	
applicant's service	ome tendencies that, if pre and about which the appli its that you have observe		
Easily embarrass Frequently worrie Prejudices towar Given to exclusive	nt, Argumentative, Domin sed, offended, discouraged ed, nervous, or tense ds stereotyped groups, ra or absorbing friendships or inability to take a joke		
		his applicant, please comment, describing the form and intensity of	

	ate this applicant's o lly stressful condition		orking w	vith children in	a prolonged setting under p	hysically
Superi	or Average	Below Avera	ige	Should be	Discouraged	
YES NO Do you believe that this applicant has the spiritual, physical, social, and emotional maturity to serve the Lord in a Christian camp setting, and do you recommend this applicant's participation as a staff member?					urity	
concerning thi					be aware of or cautioned on the help the applicant grow in	
	o other persons qual Addres				cant Relationship to Applicant_	
SUMMARY	•					
Is this person closely within		ally, spiritually, phy	ysically,	and emotiona	lly to have a good experienc	e working
Mature	Enough M	arginal	Allo	w God to work	more first	
					ations for working with childr	en as a —
OVERALL	RECOMMENDA	TION	1			
Marginal a	nded without reserva cceptance; have sor NOT recommended	ne reservations				
	ed this reference for ny interaction in his/		/ knowle	edge; it is an a	ocurate reflection of the app	licant, as
Signature:					Date:	
					o Applicant:	
Address:						
	p:					
Daytime Phon	e Number:		E-mail:			
Return ti	The	utive Director/Co Brethren Retreat W 275N		ial		

Shipshewana, IN 46565



Summer Staff 2018

Medical Form and Health Record

Name	
E-mail Address	Age as of September 1, 2017 Birthdate
Permanent Address	
City/State/Zip	Home Phone
Parent/Guardian	Work Phone
If Parent/Guardian is not available in an	emergency, notify:
Name/Relationship	Phone
Health History (Check if applies, explain	below if necessary):
Allergies Convulsion Asthma Diabetes Bladder Control Ear Infection	s Hay Fever Ivy Poisoning Headaches Medications ons Insect Stings Special Diet
Date of last Tetanus Booster	Immunizations Complete (circle): Yes No
Operations in last 12 months	
Medications/Restrictions	
Insurance Carrier	Policy #
	know. In the event that I cannot be reached in an EMERGECY, In selected by the Brethren Retreat to hospitalize, secure proper esthesia, or surgery.
Signature	Date
Parent/Guardian Signature (if under 18)	Date