



## 2019 Junior Counselor & CIT Application Letter

Dear Prospective Junior Counselor & Counselor-in-Training (CIT),

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 2019. 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 99<sup>th</sup> summer of ministry. Our Camp Shipshewana 2019 theme is: **“Pure Heart, Clean Mind, Strong Faith”** Our theme verse is **“*The Purpose of my instruction is that all believers would be filled with love that comes from a pure heart, a clear conscience, and genuine faith.*” – 1 Timothy 1:5**

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 10-14, 2019, provided there still remains an open position. That has not been the case in past years. So . . . get your application materials submitted promptly. We are expecting an abundance of excellent ministry applicants for Camp Shipshewana 2019! I encourage you to return your application by **January 31<sup>st</sup>** 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 them 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 find ways to through the year and that the Lord will continue to show you things and people who need prayer!

**Pure Heart, Clean Mind, Strong Faith**

*1 Timothy 1:5*

Rick Miller

*Executive Director*

Fall/Winter 2018 and Spring 2019



# APPLICATION FOR MINISTRY

## JUNIOR COUNSELOR & CIT

### Camp Shipshewana Programs

**9095 W CR 275 N \* Shipshewana, IN 46565**

**Phone: 260.768.4519 / Fax: 260.768.4615 / E-mail: brcship@juno.com / www.brethrenretreat.org**

### BIOGRAPHICAL BACKGROUND

Date: \_\_\_\_\_ Position Desired: \_\_\_\_\_  
Name: \_\_\_\_\_ Sex: M F Age: \_\_\_\_\_  
Birth Date: \_\_\_\_\_ SS#: \_\_\_\_\_ Education Level: \_\_\_\_\_  
Permanent Address: \_\_\_\_\_ City/St/Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_ Good until: \_\_\_\_\_ E-Mail: \_\_\_\_\_  
What size adult T-shirt do you wear? S M L XL XXL

Driver's License#: \_\_\_\_\_ Vehicle Year/Model/Color: \_\_\_\_\_  
*The Brethren Retreat needs to have a record of vehicles being parked on the grounds by staff members.*

How did you learn about The Brethren Retreat/Camp Shipshewana?  
 I am a former camper/staff     From a former camper/staff     Brethren Retreat Website  
 Other source: \_\_\_\_\_

List all the members of your immediate family:

Name	Age	Relation	Occupation/School
1. _____	N/A	Father	_____
2. _____	N/A	Mother	_____
3. _____	_____	_____	_____
4. _____	_____	_____	_____
5. _____	_____	_____	_____
6. _____	_____	_____	_____

My parents are \_\_\_\_\_ Married \_\_\_\_\_ Separated \_\_\_\_\_ Divorced (check one)  
If parents are separated, divorced, or remarried, provide approx. dates of occurrence. \_\_\_\_\_

Briefly describe yourself. What are your personality traits, strengths, weaknesses, likes, & dislikes?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### SPIRITUAL BACKGROUND

Home Church: \_\_\_\_\_ Pastor: \_\_\_\_\_  
Address: \_\_\_\_\_ City/St/Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ E-Mail: \_\_\_\_\_  
Youth Pastor: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Please answer the following questions on a separate sheet of paper (hand written or typed)

- Briefly explain how and why you became a Christian. Also illustrate any growth or struggles you have experienced since.
- What do you believe to be the strengths and weaknesses of your relationship with God?
- Describe the current status of your devotional time, servanthood, witnessing, and prayer life.
- What is your involvement with your youth group?
- Describe your involvement as a leader/participant in Christian ministry outside of your local church.

**EDUCATION BACKGROUND**

High School: \_\_\_\_\_ Year of Graduation: \_\_\_\_\_ GPA: \_\_\_\_\_

Please list any scholastic honors or school related teams/clubs/organizations you were/are involved in, including leadership positions held.

\_\_\_\_\_  
\_\_\_\_\_

What are you educational/career goals and why?

\_\_\_\_\_  
\_\_\_\_\_

**CAMPING EXPERIENCE/TRAINING**

Please list any previous camping experience/training. Include dates as a camper and/or staff member.

\_\_\_\_\_  
\_\_\_\_\_

Describe any previous experience that you have had working with children between the ages of 6-17.

\_\_\_\_\_  
\_\_\_\_\_

Indicate skill level for all of the following: "1" Can lead "2" Can assist "3" Interest, no experience "4" No Interest

- |              |                        |                     |                       |
|--------------|------------------------|---------------------|-----------------------|
| ___ Archery  | ___ Arts & Crafts      | ___ Basketball      | ___ Bible Study       |
| ___ Canoeing | ___ Dance              | ___ Drama           | ___ Fire Building     |
| ___ Hiking   | ___ Nature Study       | ___ Outdoor Cooking | ___ Photography/Video |
| ___ Puppets  | ___ Recreational Games | ___ Song Leading    | ___ Story Telling     |
| ___ Swimming | ___ Team Building      | ___ Team Sports     | ___ Tent Camping      |

Describe any previous training, certification, or teaching experience below.

List any musical instruments that you play well enough to participate in worship: \_\_\_\_\_

**GENERAL INFORMATION**

Do you have any physical, medical, or mental health conditions or any special limitations (diet, exercise, stamina, addictions, prescription medications) **YES** **NO**  
(circle one)

If yes, please explain: \_\_\_\_\_

Physician: \_\_\_\_\_ Phone: \_\_\_\_\_

Have you ever been arrested for any violation that resulted in a conviction, a plea of guilty or no contest, probation, community service, summary report, or some other form of adjudication (other than minor traffic violations)? Also, do you have any pending charges or are you under any type of investigation? If yes, explain fully on a separate piece of paper. (circle) **YES** **NO**

Have you ever been accused of physical or sexual abusive behavior? If yes, explain fully on a separate piece of paper. (circle) **YES** **NO**

Why do you desire to serve as a volunteer at the Brethren Retreat?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Complete this sentence: " I think others would describe me as . . ."

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What experience have you had in working as a team? What are your strengths and weaknesses as a "team player"

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### APPLICANT AGREEMENT AND RELEASE

I understand that the existence of a record of criminal activity or child abuse may, depending on the circumstances, disqualify me from consideration as an applicant to the Brethren Retreat Staff Team. I further understand Criminal and Child Abuse background checks may be conducted if I am accepted as a member of the Brethren Retreat Staff Team. Failure to fully disclose one's record will typically result in immediate dismissal. To the extent of my knowledge, the information on this application is truthful and accurate. By means of this release, I authorize the Brethren Retreat to make inquiries about me with the people listed in this application.

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent's Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
*(If applicant is under age 18, parent's signature is required before Brethren Retreat can process application.)*

Return completed application to:

**The Brethren Retreat** *at Shipshewana Lake*  
Rick Miller, Executive Director  
9095 W 275 N  
Shipshewana, IN 46565



## Summer Staff 2019 Medical Form and Health Record

Name \_\_\_\_\_

E-mail Address \_\_\_\_\_ Age as of September 1, 2019 \_\_\_\_\_ 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):

- |  |   |  |  |
|--|---|--|--|
| <input type="checkbox"/> Allergies       | <input type="checkbox"/> Convulsions    | <input type="checkbox"/> Hay Fever     | <input type="checkbox"/> Ivy Poisoning |
| <input type="checkbox"/> Asthma          | <input type="checkbox"/> Diabetes       | <input type="checkbox"/> Headaches     | <input type="checkbox"/> Medications   |
| <input type="checkbox"/> Bladder Control | <input type="checkbox"/> Ear Infections | <input type="checkbox"/> Insect Stings | <input type="checkbox"/> Special Diet  |

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Date of last Tetanus Booster \_\_\_\_\_ Immunizations Complete (circle):    Yes    No

Operations in last 12 months \_\_\_\_\_

Medications/Restrictions \_\_\_\_\_

Insurance Carrier \_\_\_\_\_ Policy # \_\_\_\_\_

**Authorization:**

This health history is correct so far as I know. In the event that I cannot be reached in an EMERGENCY, I hereby give permission to the Physician selected by the Brethren Retreat to hospitalize, secure proper treatment for, and to order injection, anesthesia, or surgery.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Parent/Guardian Signature (if under 18) \_\_\_\_\_ Date \_\_\_\_\_



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

\_\_\_\_\_ has applied to serve at the Brethren Retreat as a

**Junior Counselor**

**Counselor-in-Training**

**Please give careful consideration to the evaluations below.**

*This applicant has given your name as a reference that has knowledge of his/her life experiences, spiritual maturity and personality characteristics. The applicant may be working with children in a prolonged setting under physically and emotionally stressful conditions.*

In checking items listed below, please remember that it would be truly an exceptional person who ranks high in all categories.

**OBJECTIVE RATING:**

Under each general heading, check the phrase that most accurately describes the applicant's HABITUAL behavior with regard to that specific trait.

1. How well is the applicant able to direct and influence others along definite lines of action?
  - Exceptional leader; inspires others along desirable lines of action
  - Very successful in leading others
  - Normally successful in directing others and controlling them
  - Usually follows leads of others
  - Poor leader; incapable of directing others
2. How does the applicant work with peers and adults for the good of the group?
  - Cooperates willingly and actively regardless of self-benefit; makes things go smoothly
  - Cooperates with others toward accomplishing same goals
  - Gives limited cooperation; neglects common good for own interests
  - Cooperates grudgingly; makes trouble - obstructionist
3. How does this applicant react to suggestions or criticism by others?
  - Asks for criticism and suggestions
  - Follows suggestions willingly
  - Listens to suggestions but may not act without considering them
  - Resists suggestions
  - Takes criticism as a personal insult
4. How responsible is the applicant? Able to completely get things done on their own?
  - Exceptionally able to accomplish work without supervision
  - Carries out routine activity on own responsibility
  - Needs detailed instructions with regular checks for accomplishment
  - With constant supervision will do satisfactory work
  - Irresponsible even under supervision
5. How well does applicant put his/her principles and convictions into action?
  - Carries out principles and convictions constantly and boldly even in face of obstacles
  - Acts according to convictions under normal circumstances
  - Fails to carry out convictions under adverse circumstances
6. How well does this person apply energy and persistence in following through with a task?
  - Unusual perseverance; does more than expected
  - Industrious, energetic, dependable at all times
  - Completes assigned tasks of own accord
  - Rather indifferent; does not finish tasks assigned
  - Needs much prodding and supervision



7. How well does applicant control emotions?

- Unusual balance between responsiveness and control (*extremely mature emotionally*)
- Well balanced (*good control*)
- Usually well balanced (*attempts good control*)
- Tends to be unresponsive (*rather numb to events*)
- Unresponsive; apathetic (*appears to be uncaring*)
- Tends to be over emotional (*seems to feed off others emotions*)
- Easily depressed, irritated or elated (*emotional roller coaster*)

**NARRATIVE REPORT**

Please state briefly instances in which you have observed the applicant's behavior as it applies to any of these items. If you have no knowledge, please indicate that rather than leaving item blank.

A. Would you be willing to have your children under the applicant's supervision for a period of 24 hours or more in a camp setting? If not - why? \_\_\_\_\_

B. Maturity of judgment: How well does the applicant react in situations of stress, i.e. making decisions?  
\_\_\_\_\_  
\_\_\_\_\_

C. **YES**                    **NO**      Dependability - Can this applicant be relied upon?  
**YES**                    **NO**      Does the applicant weaken in absence of authority?

D. How long have you known the applicant? \_\_\_\_\_  
In what capacity have you observed this applicant? \_\_\_\_\_

E. To what extent have you seen the applicant in a leadership role? \_\_\_\_\_

F. **YES**                    **NO**      To your knowledge, does the applicant use drugs or alcohol?  
**YES**                    **NO**      Is the applicant prone to child or sexual abuse?

G. To your knowledge, has the applicant accepted Jesus Christ as their savior and lived a life that emulates that commitment? Please explain. \_\_\_\_\_

H. **YES**                    **NO**      Would you, without reservation, recommend this applicant to serve in a Christian camping program with responsibilities that involves serving as a role model who emulates Jesus Christ?

I have reviewed this reference form to the best of my knowledge; it is an accurate reflection of the applicant as observed by my interaction in his/her life.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship to Applicant: \_\_\_\_\_

Daytime Telephone Number: \_\_\_\_\_ Email: \_\_\_\_\_

Please return this form to:

Executive Director/Confidential  
The Brethren Retreat  
9095 W 275N  
Shipshewana, IN 46565