INTERNATIONAL GYMNASTICS CAMP
9020 Bartonsville Woods Rd Stroudsburg PA 18360-8137
Phone: (570) 629-0244 Fax: (570) 620-0616
www.internationalgymnastics.com

NON INSTRUCTIONAL STAFF APPLICATION

- ❑ CAMP STORE
- ❑ DAY CAMP
- ❑ GARDENER
- ❑ GATE GREETER
- ❑ GROUNDS / WORK CREW
- ❑ HOUSEKEEPING
- ❑ KITCHEN STAFF
- ❑ LIFEGUARD
- ❑ NIGHTWATCHMAN
- ❑ NURSE RN
- ❑ OFFICE
- ❑ ROPES COURSE

Important: For consideration this application **MUST** be accompanied by:

- ❑ Copy of your driver's license
- ❑ Copy of your social security card
- ❑ Two IGC Letters of Reference

PERSONAL INFORMATION: **Date:** _____

Last Name: _____ First Name: _____

Social Security Number: _____-_____-_____

Dates Available:_____

Permanent Address:

Street: _____

City: _____ State: _____ Zip:_____

Phone #'s: Home: (_____)_____ Work: (_____)_____
Cell: (_____)_____ Fax: (_____)_____

Current Address:

Street: _____

City: _____ State :_____ Zip:_____

Phone #'s: Home: (_____)_____ Work: (_____)_____
Cell: (_____)_____ Fax: (_____)_____

Email Address: _____@_____

IGC IS AN EQUAL OPPORTUNITY EMPLOYER

List your last three employers:

Employer	Supervisor	Phone #	Your Position	Dates	Reason For Leaving

List three personal references whom we can call, other than family members:

Name	Phone#	Relationship

Please list degrees, licenses and certifications that you currently hold:

1. _____
2. _____
3. _____

Describe all leadership / volunteer positions that you have held: _____

_____

_____

What experience do you have working with children? (Describe duties, responsibilities and ages of children.)

_____

_____

_____

Please list any coaching or counseling experience you have had:

_____

_____

Have you ever worked at a camp (of any kind) before? _____ If "YES" when? _____

Which Camp? _____ In what capacity?_____

What were your responsibilities? _____

_____

_____

What assets can you bring to this camp?

_____

What are your strongest qualities?_____

_____

How would you describe yourself to someone who doesn't know you?

_____

What do you feel will be your biggest challenge?

_____

What would be the most important thing you would want campers to learn from you?

_____

_____

_____

Why should IGC hire you?

_____

_____

Please list any additional information you feel is important:

_____

_____

_____

BACKGROUND INVESTIGATION QUESTIONS

"YES" answers to the following five questions will not necessarily result in denial of employment. We will consider all the circumstances, including the date and nature of events which have led to the actions described below. Your written explanation will assist us in determining your eligibility and suitability for employment. You may attach additional sheets if necessary.

1. Have you ever been convicted of, admitted committing, or are you awaiting trial for any crime (excluding only minor traffic violations not involving any allegation of drug or alcohol impairment)? You must answer "YES" even if the matter was later dismissed, deferred, vacated or expunged. If you answer "YES",you must provide dates of the proceedings, the court where the proceedings occurred, a statement of the accusation against you and the final disposition of the case(s).

YES _____ NO _____

Explanation:

_____

_____

2. Do you authorize International Gymnastics Camp to obtain your Motor Vehicle Records report for employment purposes and authorize anyone to disclose this information to the International Gymnatics Camp? Do you release all persons from any liability for obtaining or providing this information? And, do you agree that a photocopy or fax copy of this authorization is as valid as the original?

YES _____ NO _____

Explanation:

_____

_____

3. Have you ever been dismissed (fired) from any job, or resigned at the request of your employer, or while charges against you or any investigation of your behavior was pending? You must answer "YES" even if the matter was later resolved with any form of settlement or severance agreement, regardless of its terms. If you answer "YES", you must provide the date of termination of employment, the name, address and telephone number of the employer(s) and a statement of the accusations against you and the final disposition.

YES _____ NO _____

Explanation:

_____

_____

4. Have you ever had any license or certificate of any kind (teaching certificate or otherwise) revoked or suspended, or have you in any way been sanctioned by, or is any charge or complaint now pending against you before any licensing, certification or other regulatory agency or body, public or private? If you answer "YES", you must provide the dates of proceedings, name, address and telephone number of the agency or body where proceedings took place, a statement of the accusations against you and the final disposition.

YES _____ NO _____

Explanation:

_____

_____

5. Are you now being investigated for any alleged misconduct or other alleged grounds for discipline for any licensing, certification or other regulatory body (teaching certificate or otherwise) or by your current or any previous employer? If you answer "YES", you must provide the name, address and telephone number of the employer or licensing body and a statement of the accusations against you.

YES _____ NO _____

Explanation:

_____

_____

I attest to the best of my knowledge that the information provided to **International Gymnastics** is accurate and true. I understand that any false information or omission may disqualify me from further consideration for employment and may result in my dismissal if discovered at a later date.

I authorize the investigation of any or all statements contained in this application and also authorize any person, school, law enforcement agency, current employer, past employers and organizations named in this application to provide relevant information and opinions that may be useful in making a hiring decision. I release such persons and organizations from any legal liability in making such statements.

I understand that this position involves working with children and I authorize International Gymnastics to do the necessary criminal background check to finalize my employment.

I have read, understand, and by my signature consent to these statements.

Print Name: _____ Signature: _____ Date: _____

PLEASE SIGN AND RETURN THIS FORM WITH COPIES OF YOUR SOCIAL SECURITY CARD AND DRIVERS LICENSE IMMEDIATELY IN ORDER FOR US TO PROCEED WITH COMPLETING THE HIRING PROCESS

INTERNATIONAL GYMNASTICS CAMP
9020 Bartonsville Woods Road, Stroudsburg, PA 18360-8137
Phone 570-629-0244 Fax 570-620-0616
www.internationalgymnastics.com

REGISTERED NURSE APPLICANTS

Please send copies of the following certifications with your application form.

1. CPR Certification
2. 1st Aid Certification
3. RN Licensure

What experience do you have with:

1. Pediatric care?_____

_____

_____

_____

2. Diabetic child care? _____

_____

_____

_____

3. Asthmatic children? _____

_____

_____

_____

Are you available for 24 hour duty, if necessary? _____

INTERNATIONAL GYMNASTICS' LETTER OF REFERENCE

THIS QUESTIONNAIRE WILL REMAIN CONFIDENTIAL

Dear Madam/Sir,

_____ has given your name as a reference for work in our camp and/or school program. We greatly appreciate your honest appraisal of this candidate's abilities, and we thank you in advance for your input and time on this matter.

We take great pride in our reputation as one of the finest gymnastics camps / schools. If accepted, this candidate will be working closely with children, and it is imperative to us that we have mature, stable, trustworthy, dedicated staff representing IGC and IGS. Please mark only those qualities that apply and with which you are personally acquainted. Your reply will be kept strictly confidential. Thank you for your cooperation and help in this matter.

Personal Qualifications:

Please rate the applicant on the following characteristics by placing a checkmark next to the item(s) which most apply. Do not checkmark items with which you are uncertain or have not had the opportunity to personally view.

Teamwork

- Troublesome and difficult
- Prefers to work alone
- Usually cooperative
- Works well with others
- Most effective team worker

Leadership

- Watches and doesn't become involved
- Tries but lacks ability
- Some leadership qualities
- Good leadership qualities
- Excellent leadership qualities

Responsibility

- Doesn't accept responsibility for work
- Occasionally accepts responsibility
- Often accepts responsibility
- Good level of responsibility
- Always accepts responsibility

Work Efficiency

- Begins but does not finish
- Does only what is needed
- Meets average expectations
- Resourceful and effective
- Excellent efficiency

Emotional Stability

- Immature
- Sometimes childish
- Usually well-balanced
- Well-balanced
- Exceptionally well-balanced

Dedication

- Reluctant to serve
- Usually willing to serve
- Often serves
- Eager to serve
- Devoted to serving others

Knowledge of Applicant:

Please circle **YES** and **NO** where it applies, otherwise please complete the answers with a written statement.

* How long have you known this applicant and in what capacity?

* How well do you know this applicant and in what capacity?

* Have you ever observed behavior that would be classified as deviant?

* Would you be willing to have your own child under the care of this applicant? **YES NO**
If **"NO"** please explain why not.

* Would you rehire this applicant? **YES NO** If **"NO"** please explain why not.

* Would you recommend this applicant? **YES NO**

* To your knowledge, does the applicant smoke, use alcoholic beverages, marijuana or other drugs? **YES NO** Please specify

* Are there any other comments you feel would help give us a better understanding of this applicant's abilities? Please use a separate sheet of paper if needed.

Please circle all of the words that describe the applicant.

Impatient	Honest	Trustworthy	Cocky
Lacking humor	Avoided by children	Overly sensitive	Looked up to
Fun	Easily irritated	Emulated by others	Self confident
Leader	Mature	Silly	Shy
Rude	Stable	Uncaring	Selfish
Good sense of humor	Egotistical	Outgoing	Makes friends easily

Your Title:_____Organization/Company:_____

Please Print Name:_____

Signature:_____ Date:_____

Please return or fax to: **IGC Staff Reference**
9020 Bartonsville Woods Rd., Stroudsburg, PA 18360-8137
Phone (570) 629-0244 Fax (570) 620-0616

INTERNATIONAL GYMNASTICS' LETTER OF REFERENCE

THIS QUESTIONNAIRE WILL REMAIN CONFIDENTIAL

Dear Madam/Sir,

_____ has given your name as a reference for work in our camp and/or school program. We greatly appreciate your honest appraisal of this candidate's abilities, and we thank you in advance for your input and time on this matter.

We take great pride in our reputation as one of the finest gymnastics camps / schools. If accepted, this candidate will be working closely with children, and it is imperative to us that we have mature, stable, trustworthy, dedicated staff representing IGC and IGS. Please mark only those qualities that apply and with which you are personally acquainted. Your reply will be kept strictly confidential. Thank you for your cooperation and help in this matter.

Personal Qualifications:

Please rate the applicant on the following characteristics by placing a checkmark next to the item(s) which most apply. Do not checkmark items with which you are uncertain or have not had the opportunity to personally view.

Teamwork

- Troublesome and difficult
- Prefers to work alone
- Usually cooperative
- Works well with others
- Most effective team worker

Leadership

- Watches and doesn't become involved
- Tries but lacks ability
- Some leadership qualities
- Good leadership qualities
- Excellent leadership qualities

Responsibility

- Doesn't accept responsibility for work
- Occasionally accepts responsibility
- Often accepts responsibility
- Good level of responsibility
- Always accepts responsibility

Work Efficiency

- Begins but does not finish
- Does only what is needed
- Meets average expectations
- Resourceful and effective
- Excellent efficiency

Emotional Stability

- Immature
- Sometimes childish
- Usually well-balanced
- Well-balanced
- Exceptionally well-balanced

Dedication

- Reluctant to serve
- Usually willing to serve
- Often serves
- Eager to serve
- Devoted to serving others

Knowledge of Applicant:

Please circle **YES** and **NO** where it applies, otherwise please complete the answers with a written statement.

* How long have you known this applicant and in what capacity?

* How well do you know this applicant and in what capacity?

* Have you ever observed behavior that would be classified as deviant?

* Would you be willing to have your own child under the care of this applicant? **YES NO**
If **"NO"** please explain why not.

* Would you rehire this applicant? **YES NO** If **"NO"** please explain why not.

* Would you recommend this applicant? **YES NO**

* To your knowledge, does the applicant smoke, use alcoholic beverages, marijuana or other drugs? **YES NO** Please specify

* Are there any other comments you feel would help give us a better understanding of this applicant's abilities? Please use a separate sheet of paper if needed.

Please circle all of the words that describe the applicant.

Impatient	Honest	Trustworthy	Cocky
Lacking humor	Avoided by children	Overly sensitive	Looked up to
Fun	Easily irritated	Emulated by others	Self confident
Leader	Mature	Silly	Shy
Rude	Stable	Uncaring	Selfish
Good sense of humor	Egotistical	Outgoing	Makes friends easily

Your Title:_____Organization/Company:_____

Please Print Name:_____

Signature:_____ Date:_____

Please return or fax to: **IGC Staff Reference**
9020 Bartonsville Woods Rd., Stroudsburg, PA 18360-8137
Phone (570) 629-0244 Fax (570) 620-0616