



APPLICATION FOR PROSPECTIVE STAFF™ Medical Personnel

Thank you for your interest in becoming part of the team at Camp Doublecreek Day Camp!

Camp Doublecreek was founded in 1971 as a vision of Carter and Trudy Lester to provide a safe and fun camp experience for children. What began as a small family business with approximately 30 campers has developed into today's family corporation providing a superior camping experience for up to 400 campers per week. As Uncle Carter always said: ***"If you haven't been to Doublecreek...You haven't been to day camp!"***

Doublecreek has always maintained the philosophy that the staff is an important element in the camp program. The mission of Camp Doublecreek is to ensure that ***"every camper leaves Doublecreek knowing someone believes in them."*** It is by this standard that we hire our staff.

It is also important that our staff be familiar with Doublecreek objectives and vision.

Objectives:

1. Safety
2. Fun - the most fun a camper ever had!
3. Learning

Vision:

Camp Doublecreek strives to run camp in a way that will allow everyone associated with it the opportunity to grow physically, mentally and spiritually with a safe and fun experience.

If you think you would like to join our team and participate in the camping experience that we described above, please complete this application and return to our office.

2017 Camp Dates

Winter Break	December 27-30 (2016)
Spring Break	March 13-17
Summer Sessions	June 5 - Aug 18

Please note: There is **mandatory** staff training in May for the Summer Sessions. Exact dates will be posted later.

The application process for medical professionals:

1. Please complete the enclosed Application Form in full, and return it with a current photo of self to the Office.
2. Once the completed application has been received, your application will be reviewed
3. The Medical Coordinator will contact you to discuss your application and possibly set up an interview.

Please feel free to contact us with any questions you may have.

Camp Doublecreek Day Camp™

PO Box 5261™

Round Rock, Tx 78683™

512-255-3661™

fax: 512-310-7812™

info@campdoublecreek.com



office use only
date rec'd _____.
license verified _____.
1st contact _____.
Interview date _____.
background ck _____.

Medical Professional Application

Please indicate the camp sessions you are interested in:

Winter Break (Dec 28-31)	<i>Summer Sessions:</i> please circle sessions you are available			
Spring Break (March 14-18)	June 6	June 13	June 20	June 27
	July 5	July 11	July 18	
	July 25	Aug 1	Aug 8	Aug 15

PLEASE PRINT AND COMPLETE ALL SECTIONS OF THE APPLICATION

Name		Date	
Email		Social Security Number	
Cell		2nd Contact Number	
DOB		Driver's License #/ State	
ADDRESS			
House #/Street Name		City/State/Zip	
PROFESSIONAL EDUCATION			
	School	Graduated	Degree/Major
Undergraduate			
Graduate School			
Other Education			

CERTIFICATIONS/LICENSES

Please list all current certifications or licenses w/expiration date

certification/license type	number	state	expiration date

EMPLOYMENT EXPERIENCE

(most recent first)

Organization	Title/Position	Dates of Employment

PREVIOUS CAMP EXPERIENCE AND/OR EXPERIENCE WORKING WITH CHILDREN

(staff or camper)

Camp/Organization	Location	Position	Dates

Please answer the following questions

(use last column for explanations)

U.S. Citizen?	yes no	
Have you ever been convicted of a crime?	yes no	
Have you ever been involved in a crime involving children?	yes no	
Have you ever been disciplined for violating any company/organization safety rules?	yes no	
Have you ever been terminated or asked to resign from a job?	yes no	
Have you ever been accused of abusing children?	yes no	

REFERENCES

(please include your most recent supervisor)

name	address	phone #	relationship to you

Please Read Carefully Before Signing

I certify that my answers to the foregoing questions are true. I have not left out any information that would be important or relevant to my requested employment at Camp Doublecreek. I understand that if I am employed, any false, misleading or otherwise incorrect statements made on this application or during interviews may be grounds for my immediate termination. I hereby authorize Camp Doublecreek to contact any company or individual it deems appropriate to investigate my employment history, character and qualifications and I give my full and complete consent to any company and/or individual requested by Camp Doublecreek to reveal any and all information as a result of this investigation. In addition, I hereby waive my right to bring any cause of action against Camp Doublecreek or its agents or employees for defamation, invasion of privacy or any other reason because of their statements or request for information relating to my background and fitness to serve as an employee. I understand that, in the event I am employed by Camp Doublecreek, my compensation, hours of employment and all other terms and conditions of employment are subject to modification or change by Camp Doublecreek at Camp Doublecreek's discretion. I agree that while employed or after employment is terminated either by myself or Camp Doublecreek I may not use Camp Doublecreek's name, image, initials, or inferences in any and all internet sites, chat rooms, or instant messages. I agree that, if I am employed, I will abide by all the rules and regulations of Camp Doublecreek and that failure to do so may be grounds for my immediate termination. I agree that beginning and continuing employment at Camp Doublecreek depends, in part, on the following:

1. Passing a drug screen and/or physical examination, if requested by Camp Doublecreek to be given by a doctor, nurse, or medical facility selected by Camp Doublecreek.
2. Satisfying Camp Doublecreek's requirements concerning:
 - a. My driving record
 - b. My criminal history record
 - c. Reference checks
 - d. Letter of recommendation/employment history verification supplied by myself
 - e. Staff training

I understand that as long as my employment with Camp Doublecreek lasts, Camp Doublecreek may enforce any or all of the above requirements at any time. I understand that completion of this form does not guarantee me status as an applicant or any consideration for employment unless I meet all stated minimum required of the position for which I am asking to be considered. Also, I give my consent for Camp Doublecreek to share information pertaining to my future employers. I further understand that Camp Doublecreek is not authorized to enter into any contract with me without the expressed written consent of a Senior Officer of Doublecreek Farm, Inc. I also understand that my employment is "at will" and may be terminated by myself or Camp Doublecreek at any time for any reason or no reason at all, with or without prior notice.

I also understand that I must attend all training sessions in order to be employed by Camp Doublecreek and will be expected to give two (2) hours per session outside of normal camp hours for maintenance and upkeep of the camp. I have read the above statements and accept the same as a condition of my employment with Camp Doublecreek.

Signature

Date

Print Name