

EMPLOYMENT

List below your last three jobs, beginning with the most recent. Covenant Pines may contact them for a reference.

Current Employer Name _____ Phone number () _____

Address _____

Street

City

State

Zip

Immediate Supervisor _____ Describe your duties/job _____

MEDICAL

Do you have accident and hospital insurance? Yes _____ No _____ If yes, list name of company and policy number _____

Explain any serious illnesses or injuries you have had in the past five years:

Please list any physical, mental, or emotional handicaps:

Are you allergic to any medication? Yes _____ No _____ If yes, what? _____

List any activities which you are physically unable to participate:

QUESTIONS

(1) Have you been a camper or a volunteer (in what capacity) at Covenant Pines before? If not at Pines, at another camp?

(2) Please state your experience of salvation and commitment to Jesus Christ

(3) Why do you want to volunteer at Covenant Pines?

(4) What size t-shirt should we order for you? _____

(5) What bus stop will you be riding up from? _____

REFERENCES

Please list two professional people (including your Pastor) or former employers (no relatives, please) who are familiar with your character and qualifications. We may contact these people. You must include the full names and addresses of your references.

Pastor _____ Church _____

Address _____ Phone W () _____
Street City State Zip

Name _____ Phone H () _____

Address _____
Street City State ZIP

Title _____ Phone W () _____

I hereby certify that all of the information that I have provided to Covenant Pines Bible Camp in this application or otherwise is true. I give permission to Covenant Pines and its agents to attempt to verify the information that I have provided by questioning my references, employers, schools, friends, family members, and anyone else who is contacted by Covenant Pines or its agents to release all information that they possess about me to Covenant Pines or its agents. I understand that if, in the sole opinion of Covenant Pines I have provided false, misleading, or incomplete information, my application will be rejected or if it has already been accepted, I will be terminated.

Applicant's Signature _____ Date _____

Covenant Pines Mission Statement

Covenant Pines, a ministry of the Twin Cities Covenant Churches, exists to reach people of all ages with the Gospel message of Jesus Christ through an experience in a Christian environment located in a natural setting.

This could be the best year of your life! When you join the staff at Covenant Pines, you join a family that grows closer in victories, defeats, joys, and tears. We at Covenant Pines are committed to this kind of growth. We work for it. We expect it. But as in any family, we realize that this kind of closeness only takes place as members are drawn closer to Christ. Our commitment to and adoration of Jesus Christ must be continually stretched and challenged. Regular time of staff worship, Bible study and sharing are essential ingredients of our Program.

Facts You May Want To Know

Medical Care-The camp provides only Worker's Comp. and Secondary Accident Insurance.

Linens-Staff members must provide their own twin bed linens, sleeping bags, towels, etc. Laundry facilities are available for staff use.

Personal Conduct- Smoking, use of tobacco, alcoholic beverages, and illegal drugs are not permitted. Use of any of these items will be cause for dismissal.

Dismissal- The camp reserves the right to dismiss an employee for incompetence, misconduct, or failure to comply with camp policies