

For Office Use Only	
_____	Received
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_____	Contacted
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<input type="checkbox"/>	Training #1
<input type="checkbox"/>	Training #2



Attach Photo

Sponsored by KidS<sup>3</sup>, Inc.  
 2500 Dallas Hwy, Ste 202, #480, Marietta, GA 30064  
 June 11-16 • 2017

# COUNSELOR/STAFF APPLICATION

**Instructions:** *Please Print.* All information is held strictly confidential. This form must be completely filled out. The information is vital to your acceptance and possible placement as counselor/staff.

Date	Current Drivers License # <small>(a photocopy of license must accompany application)</small>	Social Security #
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Last Name	First Name	M ___ F ___	/ ___ / ___	Sex	Birthdate
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Street	Age	Marital Status
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City	State	Zip
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Occupation	Name of Employer	Number of years
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How long have you lived in Georgia? \_\_\_\_\_ Years and \_\_\_\_\_ months  
 If you have lived in Georgia for less than one year, list your complete addresses for the last five years:

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(_____) _____ Home Phone	(_____) _____ Cell Phone	_____ Email Address
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Emergency Contact	Relationship	(_____) _____ Phone
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T-Shirt Size:  Adult Small  Adult Medium  Adult Large  Adult X-Large  Adult XX-Large

Do you have certification in the following?:  CPR  First Aid  Life Guard  Nurse  EMT

*Do you have previous training or background in dealing with abused, neglected or abandoned children?*

No  Yes. In what way: \_\_\_\_\_

Were you a victim of abuse, neglect or abandonment as a minor?:  NO  YES

Yes, but I would prefer to discuss this in person.

Please clarify: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Please describe why you wish to be a counselor for abused kids (use the back for space if necessary):

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## MEDICAL HISTORY

Do you have any medical conditions?  NO  YES, please describe:

\_\_\_\_\_

Do you take any medications?  NO  YES, please list medicine, reason and any side effects:

\_\_\_\_\_

Have you had any serious illness or injuries in the last three years?  NO  Yes, please list:

\_\_\_\_\_

Have you any physical handicaps or conditions preventing you from performing any type of activity?

NO  YES, please list:

\_\_\_\_\_

## RECORD OF EDUCATION

High School Name: \_\_\_\_\_ Date of Graduation: \_\_\_\_\_

College: \_\_\_\_\_ Major: \_\_\_\_\_ Date of Graduation: \_\_\_\_\_

Other: \_\_\_\_\_ Major: \_\_\_\_\_ Date of Graduation: \_\_\_\_\_

## PERSONAL REFERENCES (not former employers or relatives)

1. \_\_\_\_\_  
Name Address Phone

2. \_\_\_\_\_  
Name Address Phone

3. \_\_\_\_\_  
Name Address Phone

**PERSONAL PROFILE**

Have you committed your life to Jesus Christ?  NO  YES Where & When: \_\_\_\_\_

What church do you presently attend? \_\_\_\_\_ How long? \_\_\_\_\_ Yrs. \_\_\_\_\_ Mos.

Pastor's name: \_\_\_\_\_ Church Phone #: \_\_\_\_\_

Do you have any previous experience working with children?  NO  YES, please describe:

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

Do you have any previous experience working with abused children?  NO  YES, please describe:

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

Do you feel you could lead a 15-minute devotion with your campers with material we provide?  YES  NO

Please circle all the words below which you believe accurately describe you:

- |           |               |             |             |           |            |
|-----------|---------------|-------------|-------------|-----------|------------|
| Timid     | Gentle        | Impatient   | Modest      | Nervous   | Loving     |
| Tactful   | Mature        | Sarcastic   | Patient     | Angry     | Deliberate |
| Congenial | Compassionate | Stubborn    | Kind        | Studious  | Selfish    |
| Secure    | Considerate   | Abrasive    | Trustworthy | Motivated | Verbal     |
| Organized | Impulsive     | Intelligent | Insecure    | Relaxed   |            |

List below, five strengths and five weaknesses you have in working with children (please be specific):

**Strengths**

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_

**Weaknesses**

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_

I would prefer my campers to be:  6-7 Yrs Old  8 Yrs Old  9 Yrs Old  10 Yrs Old  11-12 Yrs Old

