

CAMP SAINT ANDREWS
New Staff Application

Name: _____

Address: _____

City: _____ **Zip:** _____

Email address: _____

Phone: _____

School: _____ **Grade in Fall:** _____

Birthday: _____ **T-Shirt size:** _____ **Scarf:** _____

Position: Counselor Counselor-In-Training Unit director Program Staff

First choice age group or program: _____

Second choice age group or program: _____

Certifications: (CPR, lifeguard, first aid, etc) _____

For New Staff applicants:

How did you hear about Camp Saint Andrews?

What experience have you had with children? (camp, baby sitting)

Do you have friends coming to camp? Who?

What leadership experience have you had?

Why do you want to come to camp?

Will you be applying for school community service hours?

Please list any special skill that may contribute to camp. (music)

Please list personal references, relationship and phone number:

Please mail to:
Camp Saint Andrews
P.O. Box 2789, Saratoga, CA 95070

For more info or questions, please call
Jared Kersh 408-799-1700 jaredkersh@yahoo
or
Sue Ramar 408-354-7684 (Home) or 408-568-8025 (Cell)
sue@nelsoncapital.com