

## **PRESBYTERIAN CAMPS AND CONFERENCE CENTERS, INC. VOLUNTEER COUNSELOR APPLICATION**

Thank you for your desire to serve God as a Volunteer Counselor! Volunteer Counselors play a vital role in our programmed camps. Their job is, not only to live and care for the campers for the week, but to share their life with them as well. No one person has more one-on-one contact with the camper's than the cabin counselors. Counselors proclaim, clarify, embody and make real the claims of Christ. Experiencing how a Christian lives is infinitely more convincing than simply hearing a Christian talk. Volunteer counselors are central to the proclamation process. They make the truths of the Gospel real and personal. Campers see in their counselors the possibility and validity of a life committed to Christ.

PCCCI summer camps are designed to support and encourage the ministry of the local churches. Our goal is for the local church to recruit Volunteer Counselors from their home church, so the relationships developed at camp between camper and counselor will continue throughout the year.

### **HOW TO APPLY**

- 1. Complete the PCCCI Registration & Medical Form**
- 2. Complete the following Application Form**
- 3. Complete Personal Reference Forms (see instructions below)**

If you have been recruited to counsel campers from your home church, the church's recommendation and Registrar's signature on your application are all that is needed. If you are not intending to counsel campers from your home church, **TWO PERSONAL REFERENCES ARE REQUIRED**. One form must be completed by your Pastor or Youth Director. The other should be from a Christian teacher, Church Elder, or employer not related to you. See **Volunteer Reference Forms** below.

- 4. Send all completed forms to:**

**Presbyterian Camp and Conference Centers, Inc.  
2009 Volunteer Counselor Application  
P.O. Box 1512  
Big Bear Lake, CA 92315-1512**

Volunteer Counselor Applicants will be selected based on qualifications, date of application and counselor demand for a particular week. Local churches may be asked to restrict the number of counselors they bring to camp if their counselor ratio is above the allowed number. (One counselor per eight campers.)

**Please note the minimum age to be a volunteer counselor is going into your junior year of high school.**

It is both a privilege and responsibility to serve as a Volunteer Counselor. PCCCI is extremely grateful to those of you who volunteer your time and offer your services to such a worthy cause. **THANK YOU!**

# PCCCI COUNSELOR APPLICATION

Mark the Camp you want to counsel for: July 11-17 \_\_, July 18-24 \_\_ July 25-31\_\_.

*Please print clearly in ink*

## **BIOGRAPHICAL INFORMATION**

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ M \_\_\_ F \_\_\_ SOC. SEC. # : \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone ( \_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_ Mobile Phone ( \_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_ Email: \_\_\_\_\_

Age: \_\_\_ Year in School: \_\_\_ Parent/Guardian: \_\_\_\_\_ Relationship: \_\_\_\_\_

Have you ever been convicted of a felony involving a minor? Yes \_\_\_ No \_\_\_

Are you in good health? Yes \_\_\_ No \_\_\_ **PLEASE NOTE:** Smoking is not permitted while at camp.

Physical Handicaps / Chronic Ailments: \_\_\_\_\_

Do you have camp experience? When and where? \_\_\_\_\_

\_\_\_\_\_

Do you have any counseling experience? When where? \_\_\_\_\_

\_\_\_\_\_

Do you know anyone who is currently serving on PCCCI staff? Yes \_\_\_ No \_\_\_ If yes, whom? \_\_\_\_\_

## **CHURCH AFFILIATION**

Name of church you most regularly attend: \_\_\_\_\_ How often? \_\_\_\_\_

Pastor's name: \_\_\_\_\_ Programs you are involved in: \_\_\_\_\_

\_\_\_\_\_

Church mailing address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Church phone # ( \_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_ Have you held any leadership positions in the church? Yes \_\_\_ No \_\_\_

If yes, please describe \_\_\_\_\_

Are you a Christian? Yes \_\_\_ No \_\_\_

In your own words, briefly explain the Gospel of Jesus Christ? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Why do you want to be a cabin counselor? \_\_\_\_\_

\_\_\_\_\_

What do you think are a few of the most important characteristics of a good cabin counselor? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

What kind of experience do you have working with children ages 7-14? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

# VOLUNTEER COUNSELOR PERSONAL REFERENCE FORM

*Please print clearly and in ink*

Name of applicant: \_\_\_\_\_

Applying to counsel at: Big Bear \_\_\_\_ Rancho La Scherpa \_\_\_\_

I waive my right to see the response on this reference form.

Applicant's signature \_\_\_\_\_ Date \_\_\_\_\_

.....  
**Information for the person completing the reference form:**

The above named person has applied to be a volunteer counselor for one of Presbyterian Camp and Conference Centers, Inc. programmed camps. The applicant is applying to be a cabin counselor for children ages 7-12. The cabin counselor will live with the children in the cabin for the week and be a role model/mentor for the children.

The volunteer counselor is one of the most important positions at camp. They will have the most one-on-one interaction with the campers and therefore will potentially have the most impact on the campers experience. We are looking for counselors who possess leadership potential, have the ability to share their Christian faith with others, have appropriate social skills and model Christian behavior.

We recognize that very few people are perfect. We need to know the applicant's strengths and limitations to determine where they can be most effective. **Please note that it is imperative your reference be honest and complete, particularly when addressing the applicant's limitations.** The applicant will not, under any circumstances be allowed to see your responses.

**Your willingness to complete this reference form in a timely manner is greatly appreciated. Please fill out the section below and mail to:**

**"Volunteer Counselor Reference "  
Presbyterian Camp and Conference Centers, Inc.  
P.O. Box 1512  
Big Bear Lake, CA 92315-1512**

.....  
How long have you known the applicant? \_\_\_\_\_

What is your relationship with the applicant? \_\_\_\_\_

Would you consider your relationship with the applicant to be (circle one):

Close and personal    10   9   8   7   6   5   4   3   2   1    Casual acquaintance

General impressions of the applicant: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Do you consider the applicant a qualified and desirable candidate to work with children ages 7-12? (Please include your reasons)

Are there any tendencies or traits, which you feel might reduce the applicant's effectiveness? \_\_\_\_\_  
\_\_\_\_\_

Would you want this person to be a cabin counselor of your own children? Yes \_\_\_\_ No \_\_\_\_ Why or why not? \_\_\_\_\_  
\_\_\_\_\_

*Please Print below*

Name: \_\_\_\_\_ Position: \_\_\_\_\_

Name of Church/business \_\_\_\_\_ Phone: (\_\_\_\_\_) \_\_\_\_\_

Home Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Signature \_\_\_\_\_