

2018 Brooke County 4-H New Camp Counselor Application

RETURN BY: March 30th to the WVU Extension Service in Brooke County

June 25-June 30, 2018

Please print or type

Date of application:

Full Name:

Address:

City, State, Zip:

Email:

Cell Phone:

Gender Information: Gender (Circle one) M F Shirt Size:

Special Accommodations such as dietary restrictions:

Camp or Experience working with children (last three years and/or most recent)

*Please list out dates, camps, directors, locations and roles for the last three years and/or most recent experience.

Tell us a little bit about yourself including specialized training in camping, and experience or training in other fields which might have a bearing on the position(s) for which you are applying. Attach a separate sheet if necessary.
Certifications and Camp Support Skills: Please circle all that apply CPR Physician Current Driver's License WSI First Aid Wilderness First Aid Food Handler's Permit Lifeguard EMT Nurse Practitioner Shooting Sports: Air Rifle Air Pistol Shotgun Archery Black Powder Wildlife Management LPN RN BSN Physician's Assistant Paramedic Other:
Non-Discrimination - Programs and activities offered by the West Virginia University Extension Service are available to all persons without regard to race, color, sex, disability, religion, age, veteran status, political beliefs, sexual orientation, national origin, and marital or family status. <i>If selected as a volunteed do you agree to abide by and uphold these policies?</i> NO
Criminal Record - Have you ever been convicted of a crime, other than a minor traffic offense? If yes, please describe. (<i>Note: a prior conviction is not an automatic bar to volunteering. The type of conviction and when it occurred will be evaluated by the camp before any decision is made.) YES NO Explain:</i>

Cooperative Extension Service WVU is and EEO/Affirmative Action Institution – Minority/Female/Disability/Veteran

Tobacco Free Policies
According to West Virginia University Board of Governors Policy #57, all WVU property (including Camp Russel) is tobacco free, which includes all forms of tobacco products. 4-H also prohibits the use of tobacco at all of its events and programs.
I agree that, if selected as a camp volunteer, I will abide by these policies prohibiting the use of tobacco products YES NO
Title IX Policy
Title IX of the Education Amendments of 1972 (Title IX) is a Federal law which prohibits discrimination on the basis of sex in any educational program or activity receiving federal financial assistance. Since Cooperative Extension 4-H Programs receive Federal financial assistance for education programs, they must adhere to United States Department of Agriculture regulations prohibiting discrimination on the basis of sex.
West Virginia University Board of Governors Policy #44 prohibits discrimination, harassment, sexual misconduct, domestic misconduct, stalking, and retaliation that occurs on WVU property (including Camp Russel) or during a WVU sponsored activity (which includes any 4-H event). As a part of this policy, all persons are expected to engage in conduct that meets professional standards, take appropriate action to prevent prohibited conduct, and avoid behavior that a reasonable person would construe as prohibited conduct.
I agree that, if selected as a camp volunteer, I will abide by all Title IX policies and all policies and regulations related to the prohibition of discrimination, harassment, sexual misconduct, domestic misconduct, stalking, and retaliation. I also understand that I may be required, at any time, to take part in training related to these policies in order to continue as a volunteer YES NO
Children on Campus Policy
West Virginia University Board of Governors Policy #49 prescribes the rules and regulations to protect any person under the age of 18 attending a WVU program (including any 4-H program or event) on WVU property (including Camp Russel). This policy mirrors West Virginia Code §49-6A-1 to -11 by reiterating that all youth camp counselors and volunteers are mandated to report any suspected child abuse or neglect, including physical abuse or neglect, to the West Virginia Department of Health & Human Resources Child Protective Services (CPS), the WVU Title IX Coordinator, and local police. The policy also mandates training for all employees and volunteers who will have direct contact with children.
I agree that, if selected as a camp volunteer, I will be a Mandated Reporter as defined by West Virginia Code §49-6A-1 to -11; that I will abide by all laws and regulations regarding the protection of persons under the age of 18; and that I must participate in training related to these policies prior to serving as a volunteer YES NO
I understand that the information that I have provided may be verified by contacting persons or organizations named in this application and I hereby release from liability any person or organization that provides information concerning me to the representatives of West Virginia University Extension 4-H Youth Development. In signing this application, I affirm that the information I have given herein is true and correct. If selected as a volunteer, I understand I serve at the request of the West Virginia University Extension Service. That request can be withdrawn for any reason or no reason at any time. I will be required to undergo a background check. A criminal record will not necessarily bar me as a volunteer, but will be considered as it relates to the specifics of the volunteer position for which I have applied. I also affirm that I will disclose to West Virginia University Extension Service if my status changes after the background check. I will immediately disclose any and all pending charges or criminal convictions. I also understand that I will be required to undergo mandatory training prior to and during my service as a volunteer.
I agree that if selected that I will participate in and complete all required camp staff training sessions. I understand that if I do not complete the required training that I will not be permitted to serve as a staff memberYesNO
Signature
Date:

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Fo	or Office use	only									
Ac	Accepted:				Date:						
De	eclined:		·		Reaso	n:					
Camp Proc			-	ark activitio	es in whic	h you h	ave expe	ertise ar	nd could te	ach or assis	t. Please
Story Tellin	ng Technolog	y Arts/Crafts	s Informa	al Games	Photog	raphy	Outdoor	Skills	Singing	Drama/Th	eater Arts
Orienteering	Swimming	Computers	Fishing	Aerobic/	Exercise	Comn	nunity Sei	rvice \	Norkforce I	Readiness	
Team Buildir	ng Gardenir	ng STEM A	ctivities	Healthy	Activities	Dai	nce S	Sports			
Accompanis	st: List instrumen	t(s)									
Other:											
Camp Staff help. Volunteer		•			_		-		s with whi	ch you are v	villing to
Cabin Counselo		ructor Dini Cabin Checl	-						-	-	

Camp Classes: Clamp classes are an opportunity for campers to learn a new skill. If you are willing and able to teach a class, please provide the following information. Please provide the following information like the name of the class you taught along with a description. We would also like to know the size of the class and the cost per camper.

Bed Check

Camp Store

Tribal Mentor

Secretary

Reflections

Dean of Men/Women

Flag Raising/Lowering

Activities for non-swimmers

Camp