



57611 Eshom Valley Drive, Badger, California 93603
Phone: (559) 337-2349 Fax: (559) 337-2251
Email: info@hartlandcamp.com Web Site: www.hartlandcamp.com

EMPLOYMENT APPLICATION

I am applying for: Full Time Part Time/Temporary Weekends Date: _____

PERSONAL DATA

LAST NAME FIRST NAME MIDDLE

STREET ADDRESS CITY STATE ZIP

() () ()

HOME TELEPHONE CELL PHONE BUSINESS PHONE E-MAIL ADDRESS

Do you have a valid Drivers License? Yes No

OTHER NAMES BY WHICH YOU ARE KNOWN (I.E. MAIDEN NAME) _____

What type of work are you interested in? _____

Date available to begin work? _____

Are there any hours, shifts, or days you cannot or will not work? Yes No If yes, please explain: _____

Will you work overtime if asked? Yes No

Are you a U.S. Citizen? Yes No

Do you have a Social Security Card? Yes No

Are you legally eligible for employment in the United States? Yes No

I authorize Hartland Christian Camp to conduct a background check. Yes No

SPIRITUAL INSIGHT

Are you currently attending a church? Yes No If yes, how long have you attended? _____

CHURCH NAME PASTOR'S NAME

ADDRESS CITY STATE ZIP

Phone: () _____

On a separate piece of paper, please answer the following:

1. Describe how you became a Christian.
2. Describe your current relationship with Christ.
3. Describe how you maintain a daily relationship with Christ.
4. Describe your current involvement in ministry or church activities.

EDUCATION AND TRAINING

SCHOOL	NAME AND LOCATION OF SCHOOL	COURSE OF STUDY	# OF YRS COMPLETED	DID YOU GRADUATE?	DEGREE OR DIPLOMA
HIGH SCHOOL				<input type="checkbox"/> Yes <input type="checkbox"/> No	
COLLEGE				<input type="checkbox"/> Yes <input type="checkbox"/> No	
BUSINESS OR TRADE				<input type="checkbox"/> Yes <input type="checkbox"/> No	

Other special training or skills (language, machine operation, etc.): _____

List professional, trade, business or civic activities, memberships and offices held. Include all licenses or certificates, showing valid dates, that may help you qualify:

Please list special interests and hobbies: _____

State any additional information that you feel may be helpful to us in considering your application:

HOUSING

All full-time employees are required to live on the grounds. To assist us in providing adequate housing, please supply the following as applicable:

Spouse's Name: _____

Dependents:

Name: _____	<input type="checkbox"/> M <input type="checkbox"/> F	Age: _____	Relationship: _____
Name: _____	<input type="checkbox"/> M <input type="checkbox"/> F	Age: _____	Relationship: _____
Name: _____	<input type="checkbox"/> M <input type="checkbox"/> F	Age: _____	Relationship: _____
Name: _____	<input type="checkbox"/> M <input type="checkbox"/> F	Age: _____	Relationship: _____

Special Needs/Considerations:

EMPLOYMENT HISTORY

LIST MOST CURRENT POSITION FIRST:

#1

Company Name: _____	Telephone: (____) _____
Address: _____	Employed From: _____ To: _____
Name of Supervisor: _____	
Job Title and Description of Work: _____	
Reason for Leaving: _____	
May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No	

#2

Company Name: _____	Telephone: (____) _____
Address: _____	Employed From: _____ To: _____
Name of Supervisor: _____	
Job Title and Description of Work: _____	
Reason for Leaving: _____	
May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No	

#3

Company Name: _____	Telephone: (____) _____
Address: _____	Employed From: _____ To: _____
Name of Supervisor: _____	
Job Title and Description of Work: _____	
Reason for Leaving: _____	
May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No	

#4

Company Name: _____	Telephone: (____) _____
Address: _____	Employed From: _____ To: _____
Name of Supervisor: _____	
Job Title and Description of Work: _____	
Reason for Leaving: _____	
May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No	

Please explain any periods of unemployment:

From: _____	To: _____	How did you spend your time: _____
From: _____	To: _____	How did you spend your time: _____

REFERENCES

PLEASE LIST THREE REFERENCES BELOW:

#1 PASTORAL REFERENCE

Name:		Title:		
Address:	City:	State:	Zip:	Phone:

#2 EMPLOYER REFERENCE

Name:		Title:		
Address:	City:	State:	Zip:	Phone:

#3 PERSONAL REFERENCE

Name:		Relationship		
Address:	City:	State:	Zip:	Phone:

PLEASE READ CAREFULLY

I understand and acknowledge the following:

1. I have read and agree with the Statement of Faith, and understand and agree with Hartland's purpose "to create an atmosphere conducive to evangelism, spiritual growth, fellowship and physical refreshment."
2. I understand that, if I am employed, any false statement, misrepresentation, or omission of facts on this application or on any supporting documents, regardless of when discovered to be false or omitted, may result in my dismissal.
3. If I am offered employment, I will, as a condition of employment, be required to submit proof of my identity and legal right to work in the U.S.
4. I understand that I will be required to possess a current and valid California driver's license if my job requires me to drive in the course of my work.
5. I understand that, if I am offered a position, it will be offered on condition that my employment shall be at will and for no definite period pursuant to Hartland's Employee Manual.
6. I authorize investigation of all statements contained in this application and any supporting documents. I authorize Hartland Christian Camp to secure information about my experience from former employers, educational institutions, government agencies, or any reference I have provided, and those parties to provide information concerning my experience, except as so noted in this application. I hereby release all parties from any liability arising from such investigation or references.
7. In the event of employment, I agree to abide by all present and subsequently issued traditions and rules of Hartland Christian Camp.

Date: _____

Signature: _____

VOLUNTARY DISCLOSURE STATEMENT

1. Previous residence(s) for last five years (include colleges and home residence(s):

City: _____	State: _____	Years: _____
City: _____	State: _____	Years: _____
City: _____	State: _____	Years: _____
City: _____	State: _____	Years: _____
City: _____	State: _____	Years: _____

(Continue on separate sheet, if necessary)

2. Have you ever been convicted of any crime relating in any manner to children and/or your conduct with them? If yes, please explain. (use a separate sheet, if necessary)

3. Have you ever been convicted of any crime including, but not limited to, those listed below and/or any crime similar in any manner to those listed?

	Yes	No
* Indecent assault and battery on a child under 14	<input type="checkbox"/>	<input type="checkbox"/>
* Indecent assault and battery on a mentally retarded person	<input type="checkbox"/>	<input type="checkbox"/>
* Indecent assault and battery on a person who has obtained the age of 14	<input type="checkbox"/>	<input type="checkbox"/>
* Rape	<input type="checkbox"/>	<input type="checkbox"/>
* Rape (with force) of a child under 16	<input type="checkbox"/>	<input type="checkbox"/>
* Assault with intent to commit rape	<input type="checkbox"/>	<input type="checkbox"/>
* Kidnapping of a child under 16 with intent to commit rape	<input type="checkbox"/>	<input type="checkbox"/>
* Distribution and trafficking of narcotics or other controlled substances	<input type="checkbox"/>	<input type="checkbox"/>
* Intent to commit any of the above crimes	<input type="checkbox"/>	<input type="checkbox"/>

If yes, please explain. (use a separate sheet, if necessary)

4. Have you ever been adjudged liable for civil penalties or damages involving sexual or physical abuse of children? If yes, please explain. (use a separate sheet, if necessary)

Yes	No
<input type="checkbox"/>	<input type="checkbox"/>

5. Are you now or have you ever been subject to any court order involving sexual or physical abuse of a minor including, but not limited to a domestic order or protection? If yes, please explain. (use a separate sheet, if necessary)

Yes	No
<input type="checkbox"/>	<input type="checkbox"/>

6. Have your parental rights (if applicable) ever been terminated for reasons involving sexual or physical abuse of children? If yes, please explain. (use a separate sheet, if necessary) Yes No

I understand that:

- a) Hartland Christian Camp may deny employment to any person who answers "yes" to any one of questions 2-6 above. If hired and the camp later discovers circumstances that would indicate a "yes" answer to any of the above questions, employment may be terminated immediately.
- b) The information provided on this form is subject to verification, which may include a criminal history check request from any Central Registry of child abusers and/or California Department of Justice.
- c) Hartland Christian Camp may terminate employment or volunteer service of any person if that person is found , regardless of when discovered, to:
 - 1) have a history of complaints of abuse of a minor;
 - 2) have resigned, been terminated, or been asked to resign from a position whether paid or unpaid, due to complaint(s) of sexual abuse of a minor; and/or
 - 3) have falsified or omitted information in this disclosure statement.

Signature: _____ Date: _____

<u>Please Mail to:</u>	Hartland Christian Camp	Phone: (559) 337-2349
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