



## SUMMER CAMP 2021 CAMP COUNSELOR & LIFEGUARD APPLICATION PACKET

FOR YOUTH DEVELOPMENT®  
FOR HEALTHY LIVING  
FOR SOCIAL RESPONSIBILITY

*Keep these pages for important dates & info!*

Dear Potential Counselor or Lifeguard:

We are excited you have decided to take the first step in joining the Y to help our youth **#ReDiscoverSummer**! The position for which you are applying is very important – hundreds of children will count on you to provide a safe and healthy summer experience! You are strongly encouraged to review the summer Camp Booklet (available online and at all branches) prior to completing this application. Please pay close attention to the following information and keep this page for future reference. If you fail to complete any step, you will no longer be considered for a position.

### **Mandatory Steps for all Staff:**

- Commit to working the entire 10 weeks of summer. Check all personal and school schedules to ensure you can work the entire summer with no more than five absences!
- Complete Application for Employment, Applicant Data Record, Parental Consent for Drug Screen (if under 18 years of age) AND Written Interview. EMAIL to rgriggs@ymcatreasurecoast.org (single .pdf only; DO NOT ATTACH FROM GOOGLE DRIVE). You are strongly encouraged to type your responses. If we cannot read your handwriting, the application will not be accepted. Incomplete applications will not be accepted.
- Participate fully in the Panel Interview and Audition Process. Dates and times are below.
- Earn First Aid and CPR certification, at your own expense (must be complete before you will be allowed to work). Classes are available at the Y, though you may elect to receive this certification elsewhere. *Lifeguard Applicants must also earn Ellis Lifeguard Certification! Register at the Stuart Branch.*
- Complete all assigned training (online AND in person).

### **Key Dates and Information:**

- Camp Dates
  - Stuart, Indiantown & Okeechobee: **Wednesday, June 2 through Friday, August 6** (training 6/1)
  - St. Lucie County: **Monday, June 7 through Friday, August 6** (training 6/5)
- Panel Interview and Auditions: Interviews and auditions are by appointment only and will be held in person, at the Stuart Branch YMCA. The process will take appx. 2 hours. Applicants will be contacted with details. Interviews will be held on the following dates and times.

Tuesday, April 27<sup>th</sup>, 5:30pm-7:30pm

Thursday, April 29<sup>th</sup>, 3:30pm-5:30pm

Monday, May 10<sup>th</sup>, 5:30pm-7:30pm

Wednesday, May 12<sup>th</sup>, 10am-12pm

Packet continues on the next page.

- Positions will be offered to successful applicants at the conclusion of the Panel Interview & Audition process. Please be prepared to complete New Hire Paperwork by ensuring you have the following documents available:
  - Proof of current CPR/First Aid certification OR a receipt showing you are registered and have paid for a certification course to be completed on or before May 31, 2021.
  - Proof of eligibility to work legally in the United States (Form I-9) – MUST provide: (1) a valid US passport; OR (2) a valid driver's license or State ID card AND a certified birth certificate OR Social Security Card; OR (3) any satisfactory combination of documents, as identified on the attached "List of Acceptable Documents."
  - Payroll – MUST bring: (1) Social Security Card; (2) Direct Deposit Form (from your bank) OR a voided check.
- CPR & First Aid classes are available at the Stuart Branch. Cost is \$75 for initial training and \$45 for recertification. Preregistration is required. More info, including class schedules, can be found here: <https://www.ymcatreasurecoast.org/cpr-first-aid-lifeguarding/>
- Ellis Lifeguard Certification is available at the Stuart Branch. Cost is \$150. To gain this certification, you are required to attend **ALL 3 days** of the class. More info, including class schedules, can be found here: <https://www.ymcatreasurecoast.org/cpr-first-aid-lifeguarding/>
- All applicants are considered for all camps. If you have age group and/or specialty camp preferences, please include them in your response to question 10 on the Written Interview.

Your role this summer will be a demanding one. Your number one responsibility will be to the campers in your group and their safety. An overview of our Camp offerings can be found on our website. If you think you are up to this challenge, please continue to the next page. We are looking forward to seeing you here for a summer full of fun!

Good Luck,

YMCA Camp Planning Team



# Employment Application

STRENGTHENING THE FOUNDATION OF OUR COMMUNITY

**Thank you for your interest in the YMCA!** The YMCA of the Treasure Coast is an equal opportunity employer. We do not discriminate in the recruitment, hiring or conditions of employment on the basis of race, color, religion, national origin, citizenship status, sex, marital status, disability, age or veteran status or any other status protected by law.

If you would like to join our team, please complete the application below.

- Be sure to write legibly.
- The application must be completed in full.
- Do not leave any spaces blank or write "see resume" in response to any question.
- Read and sign the last page of the application.



## Personal Information

Position applying for: \_\_\_\_\_ Date of Application: \_\_\_\_\_

Preferred YMCA/Program Location(s): \_\_\_\_\_ Date Available: \_\_\_\_\_

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

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell/Business Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

Are you 18 years of age or older? *(If not, you may be required to provide authorization to work)*  Yes  No

If hired, can you provide verification of your legal right to work in the United States?  Yes  No

Can you perform the essential functions of the job for which you are applying, with or without reasonable accommodation?  Yes  No

Have you ever been discharged or asked to resign from a previous job? If yes, give dates and circumstances.  Yes  No

Have you ever been subject to a child or adult abuse investigation? If yes, please provide a date, charge and general comment.  Yes  No

Have you ever been convicted of a crime, pled no contest, or had adjudication withheld? If yes, please provide a date, charge and general comment. *(A conviction will not necessarily bar employment. The Company may consider the nature, date and circumstances as to whether the offense is relevant to the duties of the position applied for.)*  Yes  No

## Employment Information

List available days/hours:

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday

Preferred Job Status:  Full time  Part time

What is your desired salary range? \_\_\_\_\_ per  Hour  Year  Seasonal  As Needed

If you are a student applying for seasonal work, will you be available during the school year?

Yes  No

Are you willing to work a split shift?

Yes  No

Have you previously been employed by the YMCA of the Treasure Coast or any other YMCA?

Yes

If yes, when?

at which locations? \_\_\_\_\_

Do you have any relatives currently working for the YMCA of the Treasure Coast or any other YMCA?

Yes  No

If yes, Name(s) and

Relationship: \_\_\_\_\_

How did you hear about the YMCA?

YMCA Staff Referral

YMCA Member

Name of referral source: \_\_\_\_\_

School

Advertisement

Walk-In

Other

YMCA Website

## Education & Training

### Educational Background

	Name of School	City, State	Diploma Awarded	Degree	Major
<input type="checkbox"/> High School <input type="checkbox"/> GED			<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> In Progress		
College			<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> In Progress		
Graduate School			<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> In Progress		
Vocational/ Other			<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> In Progress		

What languages do you speak and/or write fluently? \_\_\_\_\_

Describe any non-employment experience such as school or volunteer activities that might strengthen your application.

### Safety & Job Specific Certifications

Type (CPR, First Aid, CDA, etc.)	Provider	Level	Expiration

# Employment History

List all previous employment during the past seven years starting with the most recent.  
Use additional sheets if needed.

Employer	Telephone	<u>Dates Employed</u> From:	Summarize the nature of the work performed and job responsibilities.
Address		To:	
Job Title	<u>Starting</u> Hourly Rate/Salary		
Immediate Supervisor and Title	\$          per		
Reason for Leaving	<u>Ending</u> Hourly Rate/Salary		
May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No		\$          per	

Employer	Telephone	<u>Dates Employed</u> From:	Summarize the nature of the work performed and job responsibilities.
Address		To:	
Job Title	<u>Starting</u> Hourly Rate/Salary		
Immediate Supervisor and Title	\$          per		
Reason for Leaving	<u>Ending</u> Hourly Rate/Salary		
May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No		\$          per	

Employer	Telephone	<u>Dates Employed</u> From:	Summarize the nature of the work performed and job responsibilities.
Address		To:	
Job Title	<u>Starting</u> Hourly Rate/Salary		
Immediate Supervisor and Title	\$          per		
Reason for Leaving	<u>Ending</u> Hourly Rate/Salary		
May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No		\$          per	

Employer	Telephone	<u>Dates Employed</u> From:	Summarize the nature of the work performed and job responsibilities.
Address		To:	
Job Title	<u>Starting</u> Hourly Rate/Salary		
Immediate Supervisor and Title	\$          per		
Reason for Leaving	<u>Ending</u> Hourly Rate/Salary		
May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No		\$          per	

Please explain any gaps in your employment history.			
What other business experience, personal experience, or training have you had that may have prepared you for this position?			

## Personal References

Do not list past employers, please list one relative.

Name: _____	Position: _____	Years Known: _____
Address: _____	City: _____	State: _____ Zip: _____
Phone #: (____) _____	Alternate #: (____) _____	

Name: _____	Position: _____	Years Known: _____
Address: _____	City: _____	State: _____ Zip: _____
Phone #: (____) _____	Alternate #: (____) _____	

Name: _____	Position: _____	Years Known: _____
Address: _____	City: _____	State: _____ Zip: _____
Phone #: (____) _____	Alternate #: (____) _____	

## Application Acknowledgement and Authorization

Please read all statements and sign below:

I authorize both the YMCA of the Treasure Coast, persons listed (references, schools, current (unless noted) and former employers and any others with whom you desire to check) to communicate with regard to any relevant information that may be required to reach an employment decision. I agree to hold such persons harmless with respect to any information they may supply.

I understand that submission of an application does not guarantee employment. I understand that nothing contained in this application or in the interview process is intended to create a contract between the Company and myself. I understand that if hired as a result of this employment application, my employment may be discontinued with or without cause at either the Company's option or my option, and that employment with the Company is considered "at-will". I agree that my employment may be changed with or without cause, with or without notice, including but not limited to termination, demotion, promotion, transfer, compensation, benefits, duties, and location of work. This constitutes my entire agreement with the Company during my employment. If employed, I agree to conform to the rules, regulations and policies of the Company at all times.

I understand that any offer of employment is contingent upon successful completion of both a urinalysis drug screen and criminal history background check. I give my consent to both screening devices. I understand that should I refuse to participate, I will not be considered for employment. I further understand that at any time during my employment, I may be required to take a drug screen if management reasonably suspects a condition exists that will prevent me from performing my job in a safe manner.

I understand that all offers of employment are conditional upon my ability to provide appropriate documents regarding my identity and legal right to work in the United States.

I acknowledge that I have read the above statements and understand them. I certify that all information provided by me in this application is correct, accurate and complete to the best of my knowledge. I understand that the falsification, misrepresentation, or omission of any facts in said document (and any other document submitted such as a resume) will be cause for denial of employment or termination of employment regardless of the timing or circumstances of discovery.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**2021 YMCA SUMMER CAMP**  
**WRITTEN INTERVIEW**

**Directions:** Please take your time and respond to the questions and prompts thoughtfully and completely. Responses must be LEGIBLE; you are strongly encouraged to type your responses (include prompts). If we cannot read your handwriting, the application will not be accepted.

**Name:** \_\_\_\_\_ **Mobile Phone:** \_\_\_\_\_

**Email** (This is how you will be contacted for an interview): \_\_\_\_\_

**Circle the position(s) are you applying for.**      *Camp Counselor*                      *Camp Lifeguard*

**Circle the site(s) would you prefer to work at.**

*Stuart Branch*

*Indiantown Branch*

*Okeechobee County*

*Bayshore Branch*

*FK Sweet (Ft. Pierce)*

*Village Green (PSL)*

1. What does the acronym "YMCA" stand for, what is the Y's mission and how will you contribute to that mission?

2. Why are you applying for a camp position, and why do you feel you are qualified?

3. At the YMCA our core values are Caring, Honesty, Respect, and Responsibility. Define one of the values and describe how you might integrate it into a camp activity.

4. This year's camp theme is "Continents." Each week of Camp will include specific activities, games, and lessons related to the theme. Select one of these weekly themes (see the Camp Booklet, online or at a Branch) and then plan & describe the following activities to fit the chosen theme. Make your plan specific to an age group (ex.: K-2<sup>nd</sup> grade or 3<sup>rd</sup> – 5<sup>th</sup> grade). Be as specific as possible, including specific instructions, supplies needed, etc.

(a.) Two games and/or activities (one indoor and one outdoor);

(b.) An arts & crafts activity.

*Written Interview continues on the next page.*

5. Counselors are not allowed to have/use cell phones during work. While you are outside on the playground, you see another staff member on their cell phone instead of interacting with the campers. How do you handle it?

6. You witness two children interacting and it appears that one child may be teasing/bullying another child. What steps do you take to stop the current situation and prevent further instances?

7. Your group is on a field trip that involves an hour of outdoor play time and it begins to rain. You will be stuck inside of the rest of the trip. What ideas do you have to help you entertain your group? Be as specific as possible.

8. One of your campers is refusing to take part in the group activity. Based on the Camp Rules (see Camp Booklet), what should you do? Be specific.

9. Tell us about any experience you have with summer camp, babysitting, or other child care experience:

10. If you prefer to work with a specific age group or specialty camp, please explain why you are specially qualified for that assignment.

*END of Written Interview*



## LISTS OF ACCEPTABLE DOCUMENTS

### All documents must be UNEXPIRED

Employees may present one selection from List A  
or a combination of one selection from List B and one selection from List C.

<b>LIST A</b> <b>Documents that Establish Both Identity and Employment Authorization</b>	OR	<b>LIST B</b> <b>Documents that Establish Identity</b>	AND	<b>LIST C</b> <b>Documents that Establish Employment Authorization</b>
<ol style="list-style-type: none"> <li>1. U.S. Passport or U.S. Passport Card</li> <li>2. Permanent Resident Card or Alien Registration Receipt Card (Form I-551)</li> <li>3. Foreign passport that contains a temporary I-551 stamp or temporary I-551 printed notation on a machine-readable immigrant visa</li> <li>4. Employment Authorization Document that contains a photograph (Form I-766)</li> <li>5. For a nonimmigrant alien authorized to work for a specific employer because of his or her status:               <ol style="list-style-type: none"> <li>a. Foreign passport; and</li> <li>b. Form I-94 or Form I-94A that has the following:                   <ol style="list-style-type: none"> <li>(1) The same name as the passport; and</li> <li>(2) An endorsement of the alien's nonimmigrant status as long as that period of endorsement has not yet expired and the proposed employment is not in conflict with any restrictions or limitations identified on the form.</li> </ol> </li> </ol> </li> <li>6. Passport from the Federated States of Micronesia (FSM) or the Republic of the Marshall Islands (RMI) with Form I-94 or Form I-94A indicating nonimmigrant admission under the Compact of Free Association Between the United States and the FSM or RMI</li> </ol>	OR	<ol style="list-style-type: none"> <li>1. Driver's license or ID card issued by a State or outlying possession of the United States provided it contains a photograph or information such as name, date of birth, gender, height, eye color, and address</li> <li>2. ID card issued by federal, state or local government agencies or entities, provided it contains a photograph or information such as name, date of birth, gender, height, eye color, and address</li> <li>3. School ID card with a photograph</li> <li>4. Voter's registration card</li> <li>5. U.S. Military card or draft record</li> <li>6. Military dependent's ID card</li> <li>7. U.S. Coast Guard Merchant Mariner Card</li> <li>8. Native American tribal document</li> <li>9. Driver's license issued by a Canadian government authority</li> <li style="text-align: center;"><b>For persons under age 18 who are unable to present a document listed above:</b></li> <li>10. School record or report card</li> <li>11. Clinic, doctor, or hospital record</li> <li>12. Day-care or nursery school record</li> </ol>	AND	<ol style="list-style-type: none"> <li>1. A Social Security Account Number card, unless the card includes one of the following restrictions:               <ol style="list-style-type: none"> <li>(1) NOT VALID FOR EMPLOYMENT</li> <li>(2) VALID FOR WORK ONLY WITH INS AUTHORIZATION</li> <li>(3) VALID FOR WORK ONLY WITH DHS AUTHORIZATION</li> </ol> </li> <li>2. Certification of report of birth issued by the Department of State (Forms DS-1350, FS-545, FS-240)</li> <li>3. Original or certified copy of birth certificate issued by a State, county, municipal authority, or territory of the United States bearing an official seal</li> <li>4. Native American tribal document</li> <li>5. U.S. Citizen ID Card (Form I-197)</li> <li>6. Identification Card for Use of Resident Citizen in the United States (Form I-179)</li> <li>7. Employment authorization document issued by the Department of Homeland Security</li> </ol>

**Examples of many of these documents appear in Part 13 of the Handbook for Employers (M-274).**

**Refer to the instructions for more information about acceptable receipts.**

**YMCA OF THE TREASURE COAST  
EMPLOYEE PARENTAL CONSENT AND RELEASE**

*To be completed for all employees under the age of 18*

The YMCA of the Treasure Coast ("YMCA") is committed to the goal of maintaining a drug-free workplace. Achieving this goal is necessary to maintain the safety and quality of the work environment, the integrity of our product and service, and the safety and health of our employees, members, guests and program participants. Furthermore, employees have the right to work with persons free from the effects of drugs. The YMCA is therefore committed to maintaining a safe and healthy workplace free from the influence of alcohol and other drugs. The YMCA's commitment to a safe work environment is jeopardized when any YMCA employee or contractor illegally uses drugs on the job; comes to work under the influence; possesses, distributes or sells drugs in the workplace; or abuses alcohol on the job. Therefore, the YMCA began drug testing of all employees on June 1, 1998.

Neither the adoption nor implementation of the YMCA's Drug-Free Workplace Program shall be construed as giving any person any right to employment with the YMCA, nor be construed to limit in any way the YMCA's right, at its sole discretion, to decline making an offer of employment or to terminate or modify any employment relationship. These policies and procedures may be modified or revoked by the YMCA at any time.

My minor child has received a copy of the YMCA's Drug-Free Workplace Program, and we have carefully and thoroughly read it. We understand that it is my minor child's obligation as a condition of employment to abide by all of its terms.

I, as the parent or guardian of the minor child to be employed, hereby give my consent for my minor child to be drug tested as part of the YMCA's Drug-Free Workplace Program. I understand that should a positive drug test result be reported to the YMCA, I will be notified accordingly by the YMCA.

**EMPLOYEE:**

\_\_\_\_\_  
Date Signed

\_\_\_\_\_  
Signature of Employee

\_\_\_\_\_  
Printed Name of Employee

**PARENT OR GUARDIAN:**

\_\_\_\_\_  
Date Signed

\_\_\_\_\_  
Signature of Parent or Guardian

\_\_\_\_\_  
Printed Name of Parent or Guardian

**YOUNG MEN'S CHRISTIAN ASSOCIATION  
OF THE TREASURE COAST, FLORIDA, INC.**

June 1, 2000  
Date Signed

By: John M. Lass  
John M. Lass  
President/CEO

