

COUNSELOR APPLICATION FORM

Christian Church (Disciples of Christ) in Tennessee
7980 Coley Davis Rd., Suite 102
Nashville TN 37221
615/646-3705 – Fax 615-646-3707

NAME: _____
ADDRESS: _____
CITY: _____ STATE: _____ ZIP: _____
HOME PHONE: _____ CELL/WORK PHONE _____
EMAIL: _____ BIRTHDAY: _____
OCCUPATION: _____ SS#: _____

Please check if **under** 18 years of Age _____

I am interested in counseling the following camps or retreats – please list in order of preference. Just a reminder – current 10th graders are eligible to counsel Firsters and Discovery Camp. Current 11th graders may counsel Firsters, Discovery or Junior and current 12th graders may counsel Firsters, Discovery, Junior or Chi Rho Camp:

Firsters Chi Rho Hope Camp
 Discovery CYF
 Junior 8ers

Have you ever been to Bethany Hills?

As a Camper Number of Years

As a Counselor Number of Years

Have you ever counseled anywhere else? Number of Years _____

Where? _____

Where is your church membership? _____

What activities do you participate in at church? _____

Why do you want to be a counselor at Bethany Hills? _____

What special skills/interests do you have that might be relevant to counseling camp? (i.e. Bible study, music, sports, crafts, hiking, etc.)

Are you trained in First Aid _____, CPR _____, and/or lifeguarding _____?

Have you ever been disciplined for, charged with, or convicted of an act of sexual misconduct or child sexual abuse? If yes, please explain: _____

Have you ever been convicted of a felony? If so, please explain: _____

Attention: The Christian Church in Tennessee is required to conduct criminal background checks on all volunteers at its Camp and Conference programs. Your signature indicates your understanding that such a check will be made and gives the Christian Church in Tennessee permission for such action.

I desire to serve as a camp counselor for the Christian Church in Tennessee at Bethany Hills. I understand that the references I have listed may be contacted to confirm my character and abilities as appropriate for leadership in the camp and conference program. I promise to cooperate with other counselors, directors and staff and to uphold all standards set forth by the Region and the Directors. With God's help, I will seek in every way to provide an experience on the highest Christian level for all who attend the camp which I serve. I will participate in all training opportunities planned for the event and at all times will conduct myself as the Christian example I am called to be. I understand that the Camp and Conference Directors will be allowed to review this application for staff planning purposes.

Signature _____ Date _____

If you have not had a background check within the last 3 years AND you are at least 18 years of age, please include the background consent form with this application, available at www.ccdctn.org/resources.

REFERENCE LIST

Note: You must have a minister's reference. In addition to one reference from a minister you must list one person familiar with your character as it relates to working with children or youth. Do not include a relative. All references will be contacted via the phone. Please list a minimum of two phone numbers for each reference. All applicants must have two reference checks completed prior to serving as a counselor at Bethany Hills.

First Reference: _____ Minister's Reference Information

Name: _____ Phone numbers: _____

Address: _____ email: _____

Relationship to Applicant: _____

Second Reference:

Name: _____ Phone numbers: _____

Address: _____ email: _____

Relationship to Applicant: _____