

# Staff Application Form



## Agapé Ministries

PO Box 115  
Hickory, PA 15340

(Please type or print) Date of application \_\_\_\_\_

Name \_\_\_\_\_ Email \_\_\_\_\_

Current Address \_\_\_\_\_ Phone \_\_\_\_\_  
Street & Number City State Zip Area/Number

Permanent Address \_\_\_\_\_ Phone \_\_\_\_\_  
Street & Number City State Zip Area/Number

Name of Church and Denomination \_\_\_\_\_ City / State \_\_\_\_\_

Name of Pastor \_\_\_\_\_

### Education

Dates	School	Major Subjects	Degree Granted

### Employment (Please include all jobs in the last two years and all jobs and volunteer experiences working with youth.)

Dates	Employer	Phone Number	Nature of work	Reason for Leaving

### Camp Experience

Dates	Camp	Director	Address	Camper or Staff

### References (Please do not use relatives or peers)

Name	Email Address	Phone Number

Position applying for \_\_\_\_\_ Salary Desired \_\_\_\_\_

Dates available from \_\_\_\_\_ to \_\_\_\_\_

Referred by \_\_\_\_\_

Please complete the following with you first thoughts. Use only the space provided.

1. I enjoy... \_\_\_\_\_
2. Agapé... \_\_\_\_\_
3. Jesus is... \_\_\_\_\_
4. Justice... \_\_\_\_\_
5. The Church... \_\_\_\_\_
6. Environmental... \_\_\_\_\_
7. Praying... \_\_\_\_\_
8. The most important issue facing the world... \_\_\_\_\_
9. Why... \_\_\_\_\_
10. Leadership means... \_\_\_\_\_

**Current Certifications/Licenses** (ex. CPR, First Aid, Lifeguard...)

Name/Type	Expiration Date

*I certify that the answers given herein are true and complete to the best of my knowledge. I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision. The applicant understands that neither this document nor any offer of employment from the employer constitutes an employment contract unless the employer and employee in writing execute a specific document to that effect.*

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

*We consider applicants for all positions without regard to race, color, sex, national origin, veteran status or the presence of a non-job related disability.*

**PLEASE RETURN THIS COMPLETED APPLICATION TO:**

**CAMP DIRECTOR  
AGAPÉ MINISTRIES  
PO BOX 115  
HICKORY, PA 15340**

**PHONE: (724) 356-2308  
campinfo@campagape.org**

**www.campagape.org**