

# COUNSELOR APPLICATION 2022

## Reminder:

- It is expected that you will register for Youth Camp, and if that is not possible, then register for Work Camp to counsel.
- If you **do not** register for Youth Camp **or** Work Camp, there will be a charge of \$300.00 to cover your expenses to counsel. **You will still need to register through our website for the session titled “Non-camper Counselor Registration.” This is where you will pay the \$300.00 and have access to the health form that is required.**

In other words, if you register for Youth Camp or Work Camp there is no charge for you to counsel, and you will be registered in our system.

**Whether you are a camper or not, ALL of you will need to register in our online system and fill out a health form.**

We must cover expenses of salaries, food, utilities, t-shirts (counselor and camper), canteen, camp picture, program expenses, insurance, and on and on.

If you look at most any other camp, they charge counselors to come to camp. We will continue to offer those who register as campers a free counselor experience, but we will need to recoup the expenses of those who counsel, but do not sign up for a camp session. This is necessary for us to continue to be able to operate responsibly. If you have any questions, as always, please feel free to contact me: [ken@campmikell.com](mailto:ken@campmikell.com)

# 2022 Mikell Summer Camp Counselor Application

**DUE March 10, 2022**

**You will need to return this form with everything filled out. Write legibly.**

**Late applications are not accepted.**

**MAIL to: The Rev. Ken Struble, 237 Camp Mikell Ct., Toccoa, GA 30577**

**NOTE: FAXES OR EMAIL ATTACHMENTS WILL NOT BE ACCEPTED!!**

Applicants must be rising high school sophomores or older.

Name: \_\_\_\_\_ Age: \_\_\_\_ Date of Birth: \_\_\_\_\_

**Current** Year in School: \_\_\_\_\_

Sex: Born Female \_\_\_ Male \_\_\_: Identify as Female\_\_ Male\_\_ Other\_\_\_\_\_

Home Address \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_ Zip Code: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

**Email:** \_\_\_\_\_ Home Parish: \_\_\_\_\_

During the past year, have you been a regular communicant at church? Yes No

In the past two years, what contributions have you made to those in your church, school, and community?

\_\_\_\_\_  
\_\_\_\_\_

What previous experience have you had at Mikell and/or other camps?

\_\_\_\_\_  
\_\_\_\_\_

What previous experience have you had working with children other than at Camp Mikell (especially include if you have experience working with inner city children)?

\_\_\_\_\_  
\_\_\_\_\_

I certify that I have answered the questions on this application completely and truthfully. I authorize the Director of Camp Mikell or other Mikell Staff to contact any reference or legal authority, including the National Sex Offender Public Website regarding this application.

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

Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

- Please check all sessions you are willing to counsel. You may prioritize. (1, 2, 3, etc.)
- There are no Outdoor Camps this summer.

**NOTE: Only rising 11<sup>th</sup> graders+ can apply to counsel Intermediate, and if you only check one session and older applicants have filled the spots, you are out of luck. Also, I start with the oldest applicants and work down to the rising 10<sup>th</sup> graders. Often, I do not have room for some/all 10<sup>th</sup> grader applicant girls. This is not a personal reflection on you but is just the reality of having a lot of good applicants.**

- \_\_\_ Performing Arts Camp: June 5-11 (4<sup>th</sup>-9<sup>th</sup> graders)  
 \_\_\_ Intermediate Camp: June 19-24 (8<sup>th</sup> and 9<sup>th</sup> graders)  
 \_\_\_ Junior Camp: June 26-July 1 (6<sup>th</sup> and 7<sup>th</sup> graders)  
 \_\_\_ Kid Camp: July 10-15 (3<sup>rd</sup>-5<sup>th</sup> graders)

\_\_\_ My T-shirt size is:  small  medium  large  xlarge  xxlarge

**Counselor Training:**

**We are unsure at this time how counselor training will be done, either by Zoom or in person, but we are looking for it to take place on May 28<sup>th</sup>. We will notify you later how we will do counselor training.**

**Write your email again here so I know I can read it: \_\_\_\_\_**

***You must turn in a new complete health form with the doctor's portion to be a counselor. Either do this when you register as a camper on the "Parent Dashboard" of the registration system, or when you register as a "Non-camper Counselor." If you do not turn in a health form, you cannot counsel. Don't come to camp without it!! Period!! ACA rules!!!***

- Counselors must be at camp by **12:00 PM** the day camp starts.
- Lunch is provided.
- Be sure to read, sign and return the counselor regulation sheet.  
Applications are due by **March 10, 2022**. **DO NOT FAX OR ATTACH IN AN EMAIL!!**

Mail all applications to: The Rev. Ken Struble, 237 Camp Mikell Ct., Toccoa, GA 30577. You may email me at [ken@campmikell.com](mailto:ken@campmikell.com) if you have any questions. Thank you for applying to be a counselor at Mikell. We need you and we appreciate you.

## Counselor Regulations

**All applicants must agree to these regulations before being accepted as a counselor. You are expected to abide by each and every one of them.**

- Counselors' primary responsibility is to take care of the campers. The campers will be supervised at all times.
- Counselors may not have in their possession or consume illegal drugs or alcoholic beverages. Counselors violating this standard will be sent home.
- Counselors agree to participate in Counselor Training. You must attend the training session. No exceptions.
- Counselors will arrive by **12 pm (Lunch)** the day the camp session starts (its fine to come a little earlier to move into your dorm. A list of which dorm you will be in will be on the door to Walthour.)
- Camp sessions end around 10 AM, except PA. Counselors may leave no earlier without approval from the director or summer staff leadership.
- Counselors may not use tobacco products.
- Cell phone usage will be restricted to your time off. We encourage you to spend time with others at Mikell to build community here and not be on the phone. While you are with the campers, your responsibility is to be with the campers.
- Counselors must register their prescription drugs with the nurse before the session begins.
- Vehicles must be parked upon arrival and not driven until departure. Vehicles will be parked in the lower field parking lot. Keys will be taken up at the beginning of camp and returned at the end of camp. There will be no trips to town.
- Counselors are responsible for reporting to their staff person any damage caused by them or their campers.
- Counselors may not bring pets to camp.
- Counselors may not have visitors during sessions.
- Bring enough clothes for the session.
- Counselors should attend Youth and/or Work Camp.
- Counselors will abide by all COVID guidelines, be a role model and assist with campers following the guidelines.
- Campers who represent all diversity are a part of Mikell, and you are a part of the leadership that will welcome and care for them.

Being a volunteer counselor is one of the most difficult and rewarding jobs you will ever have. You will be an important part of the ministry of Mikell. You will be with the campers from the time you wake up until the time you go to bed, with few exceptions. If you agree to the above rules and are up for the job, please sign below, and thank you.

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

**Voluntary Disclosure Statement**  
**All Camp Staff** FM 16  
Developed and approved by the  
American Camp Association

Mail this form along with your application. Answer all questions that apply. Thank you. Ken

Name \_\_\_\_\_ Birth date \_\_\_\_\_  
Last First Middle

Home address \_\_\_\_\_  
Street Address City State Zip

Social Security # \_\_\_\_\_ Other names by which known (e.g., maiden name) \_\_\_\_\_

Home phone \_\_\_\_\_ Business phone (if applicable) \_\_\_\_\_

Cell phone (optional) \_\_\_\_\_ E-mail address (optional) \_\_\_\_\_

School or College \_\_\_\_\_

Address \_\_\_\_\_  
Street Address City State Zip

Driver's License # \_\_\_\_\_ State \_\_\_\_\_ Expiration Date \_\_\_\_\_

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

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?

Yes  No

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

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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 below?

Yes  No

- Indecent assault and battery on a child under fourteen
- Indecent assault and battery on a mentally retarded person
- Indecent assault and battery on a person who has obtained the age of fourteen
- Rape
- Rape of a child under sixteen with force
- Assault with intent to commit rape
- Kidnapping of a child under sixteen with intent to commit rape
- Distribution and trafficking of narcotics or other controlled substances
- Intent to commit any of the above crimes.

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

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4. Have you ever been adjudged liable for civil penalties or damages involving sexual or physical abuse of children?

Yes  No

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

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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?

Yes  No

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

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6. Have your parental rights ever been terminated for reasons involving sexual or physical abuse of children?

Yes  No

If yes, please explain:

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I understand that:

- a) The camp may deny employment to any person who answers "yes" to any one of questions 2-6. If hired and the employer 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 and request from any Central Registry of child abusers.
- c) The 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.
- d) This disclosure statement must be updated yearly.

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

Signature of Minor's Parent or Guardian \_\_\_\_\_ Date \_\_\_\_\_