



C/O St. John Orthodox Church  
1663 Tutwiler Ave Memphis, TN 39107  
Phone: 901.274.4119  
Email: [CampStThekla@gmail.com](mailto:CampStThekla@gmail.com)  
Website: [www.CampStThekla.org](http://www.CampStThekla.org)

## 2017 CIT Application Instructions

### Session I: Sunday, June 25 – Saturday, July 1

### Session II: Sunday, July 2 – Saturday, July 8

**PHILOSOPHY:** All members of the Camp Staff; including CIT's (Counselors-in-Training), and Volunteers, are responsible for carrying out the Mission of Camp St. Thekla, which is to present to young people a living experience of the Holy Orthodox Faith in their relationship with God and other campers in an uncluttered, natural environment. With God's help we work to strengthen the campers' grasp of the basics of the Christian life: participation in the liturgical, sacramental, and ascetical life of the Church, and living in community with fellow members of the Body of Christ with peace toward all of God's creation.

**FEES:** The CIT fee is \$400 for their week at camp. A \$50 deposit must accompany the application; this fee will be returned if you are not offered a CIT position. The remaining balance is due upon notification of acceptance, prior to June 1.

**AGE:** CIT applicants must be at least 17 years of age by June 25, 2016.

**DURATION:** CIT Check-In for the first session will take place from 1-5 pm on Sunday, June 25; and CIT's must be picked up, between 9 am and 12 noon on Saturday, July 1. CIT Check-in for the second session will take place from 1-5 pm on Sunday, July 2; and CIT's must be picked up between 9 am and 12 noon on Saturday, July 8. Any deviations from these times require approval from the Camp Director and will be subject to a supervision fee of \$25 per hour. Emergency leave absences during camp are granted at the discretion of the Camp Director.

**REFERENCES:** This packet includes two reference forms, one to be completed by your parish priest, and one to be completed by non-relative adults who have knowledge of your suitability for the position (teachers, coaches, employers, etc.). It is your responsibility to either collect the completed sealed references and include them with your application or make sure they are sent to Camp St. Thekla by the April 1 deadline. Please carefully follow the instructions given on the reference forms.

**APPLICATIONS:** We currently have four CIT positions (2 male and 2 female) available for each session. All applications must be postmarked no later than **April 1**. Notification of acceptance will be sent out on or before **May 1**.

#### **A completed application must include the following:**

- A completed and signed CIT Application Form (attached).
- \$50 deposit check.
- A photocopy of your Driver's License or other Government issued I.D.
- A photocopy of any relevant certifications (CPR, Life guarding, etc.)
- References completed by your Parish Priest and a non-relative.
- A signed copy of the Camp St. Thekla Staff Policy for Online Social Networking and Blogging Websites
- A signed copy of the Authorization for Background Check and Voluntary Disclosure.
- A 1-2 page essay (see application).

**SELECTION:** Applications will be judged based on information from the following sources: a phone interview; the neatness, promptness, and completeness of the application; the insight provided by the essay; and the testimony of the references.



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## 2017 CIT APPLICATION

**All portions of this application are due by April 1**

**ATTACH  
 PHOTO  
 HERE**

Name: \_\_\_\_\_ Preferred First Name: \_\_\_\_\_

Date of birth: \_\_\_\_\_ Age: \_\_\_\_\_ Telephone: \_\_\_\_\_

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

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Country: \_\_\_\_\_

Home Phone: ( \_\_\_\_ ) \_\_\_\_\_ School Phone: ( \_\_\_\_ ) \_\_\_\_\_

Parish Name: \_\_\_\_\_ City: \_\_\_\_\_ ST/PR: \_\_\_\_\_

Emergency contact: \_\_\_\_\_ Relationship to Applicant: \_\_\_\_\_

Emergency Phone: Day ( \_\_\_\_ ) \_\_\_\_\_ Evening ( \_\_\_\_ ) \_\_\_\_\_

### PREVIOUS CAMP EXPERIENCE

|               |                |           |              |           |
|---------------|----------------|-----------|--------------|-----------|
| Name of Camp: | Dates (Years): | __ Camper | __ Counselor | __ Other: |
| <hr/>         |                |           |              |           |
| Name of Camp: | Dates (Years): | __ Camper | __ Counselor | __ Other: |
| <hr/>         |                |           |              |           |
| Name of Camp: | Dates (Years): | __ Camper | __ Counselor | __ Other: |
| <hr/>         |                |           |              |           |

### WORK EXPERIENCE

|          |           |             |          |        |
|----------|-----------|-------------|----------|--------|
| Company: | Position: | Supervisor: | Phone #: | Dates: |
| Company: | Position: | Supervisor: | Phone #: | Dates: |
| Company: | Position: | Supervisor: | Phone #: | Dates: |

## EDUCATION

School: \_\_\_\_\_ Dates: \_\_\_\_\_ Year in School: \_\_\_\_\_ Degree: \_\_\_\_\_ Grad Date: \_\_\_\_\_  
School: \_\_\_\_\_ Dates: \_\_\_\_\_ Year in School: \_\_\_\_\_ Degree: \_\_\_\_\_ Grad Date: \_\_\_\_\_  
School: \_\_\_\_\_ Dates: \_\_\_\_\_ Year in School: \_\_\_\_\_ Degree: \_\_\_\_\_ Grad Date: \_\_\_\_\_

## REFERENCES

Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Relationship: \_\_\_\_\_

## ACTIVITIES/CERTIFICATIONS

Please number these activities: (1) I am willing and able to assist in teaching. (2) I have an interest and would be willing to learn more and help.

Art     Camping     Christian Ed     Archery     Canoeing  
 Sports     Chanting     Hiking/Backpacking     Nature    Other: \_\_\_\_\_

**Pool Safety:** Do you now have, or will you have by the beginning of Camp:  
Lifeguard Certification (or equivalent)? Yes \_\_\_ Expiration Date: \_\_\_\_\_ No \_\_\_ Will Obtain \_\_\_  
Water Safety Instructor? Yes \_\_\_ Expiration Date: \_\_\_\_\_ No \_\_\_ Will Obtain \_\_\_

**CPR and First Aid:** All Camp Staff are encouraged to have current certifications in Red Cross First Aid and Adult CPR (or their equivalents), valid through July 9.

Are you currently certified? Yes \_\_\_ No \_\_\_  
Expiration Dates: CPR Certification: \_\_\_/\_\_\_/\_\_\_ First Aid Certification: \_\_\_/\_\_\_/\_\_\_

If not currently certified, are you willing to obtain certification before arriving at camp? Yes \_\_\_ No \_\_\_

**Restrictions:** Would you have any difficulty in performing any of the essential elements of the job for which you have applied? If so, explain:

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## ESSAY

Please enclose a 1-2 page essay with your application on the following topics:

- 1) A brief biographical sketch.
- 2) What in your past camping experience has made you want to be a CIT.
- 3) What you hope to gain by serving as a CIT at Camp St. Thekla.

## Agreement

\_\_\_ I attest that all of the above information is true. I have read the accompanying CIT information sheet and agree to all of its contacts.

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

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



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## 2017 Clergy Reference Form

**Instructions for the Applicant: Please complete this part before giving it to your parish priest.**

I, the undersigned, have agreed to waive my right to read this reference. After my reference writer completes this form, I will collect this reference inside an envelope with my priest's signature over the sealed flap and I will send it together with all other application materials, or arrange to have it sent directly to the camp by the **April 1 deadline**.

Printed Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Priest's Name: \_\_\_\_\_ Parish: \_\_\_\_\_ City, ST/PR: \_\_\_\_\_

**Instructions for Clergy Reference Writer:** After completing this form, please place it in an envelope and sign your name over the sealed outside flap, and return it to the applicant. Your prompt completion of the form is greatly appreciated. If you prefer, you may mail the form directly to us at the above address. Thank you for your time and your valued assistance.

**Part 1: Rating of Personal Qualities:** How long have you known the applicant? \_\_\_\_

No one candidate will excel in all areas listed below. Please candidly evaluate the applicant based on your observed knowledge using the following scale definitions. Please circle one for each category.

| In my opinion, the applicant:                                | Completely Agree | Agree | Somewhat Agree | Disagree | Completely Disagree | No basis for rating |
|--|------------------|-------|----------------|----------|---------------------|---------------------|
| Can be depended on to follow through with responsibilities   | 5                | 4     | 3              | 2        | 1                   | NB                  |
| Seems more mature than peers                                 | 5                | 4     | 3              | 2        | 1                   | NB                  |
| Is considered to be a motivated person                       | 5                | 4     | 3              | 2        | 1                   | NB                  |
| Is perceptive to situations going on in his/her surroundings | 5                | 4     | 3              | 2        | 1                   | NB                  |
| Shows initiative in taking responsibility                    | 5                | 4     | 3              | 2        | 1                   | NB                  |
| Shows leadership capacities                                  | 5                | 4     | 3              | 2        | 1                   | NB                  |
| Demonstrates good problem solving                            | 5                | 4     | 3              | 2        | 1                   | NB                  |
| Would be easily entrusted with the care of my own children   | 5                | 4     | 3              | 2        | 1                   | NB                  |
| Works as a team member                                       | 5                | 4     | 3              | 2        | 1                   | NB                  |
| Would probably respond well in a crisis                      | 5                | 4     | 3              | 2        | 1                   | NB                  |

**Part 2: Narrative Report:**

1. How would you describe the applicant's attendance at Liturgical services?

Frequently    Regularly    Rarely Attends    Never attends

Comments:

2. How would you describe the applicant's participation in the Sacraments (Confession and Communion)?

Regularly    Infrequently    Almost never    Never

Comments:

3. In which parish organizations has the applicant been active (circle as many as apply):

Youth Group   Choir   Altar Server   Sunday School

Other:

4. Please comment about the applicant's Christian education:

Solid understanding of the Faith    Understands some aspects    Little understanding

Comments:

5. In what way(s) do you think the applicant would benefit from a position at Camp St. Thekla?

6. Would you wholeheartedly recommend this applicant for a position at Camp St. Thekla?    Yes    No

7. Please make any additional comments you think might be helpful to us in determining whether this applicant has the qualifications to be a hardworking member of the leadership team and the moral, Christian model among their peers.

Comments:

To the best of my knowledge, all statements made or indicated on this Reference Form are true and represent my honest appraisal of the qualifications of the applicants.

If needed, may we contact you for more information?    Yes    No

Daytime Phone Number:

Email Address:

Signature:

Date:



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## 2017 Reference Form

**Instructions for the Applicant: Please complete this part before giving it to your reference writer.**

I, the undersigned, have agreed to waive my right to read this reference. After my reference writer completes this form, I will collect this reference inside an envelope with my reference's signature over the sealed flap, and I will either send it together with all the other application materials, or arrange to have it sent directly to the camp by the by the **April 1 deadline.**

Applicant  
 Name:

Applicant  
 Signature:

Date:

**Instructions for the Reference writer:** After completing this form, please place it in an envelope and sign your name over the sealed outside flap, and return to the applicant. Your prompt completion of the form is greatly appreciated. If you prefer, you may mail the form directly to us at the above address. Thank you for your time and your valued assistance.

How long have you known the applicant? \_\_\_\_\_

In what capacity? Please check one:

Church Community Member

Supervisor (In what setting?) \_\_\_\_\_

Teacher     Coach

Other: \_\_\_\_\_

**Part 1: Narrative Evaluation**

What talents or strengths do you think the applicant will bring to the camp setting?

All staff members face challenges during their time at camp. Some challenges are a result of the tremendous responsibility placed on camp staff. Other challenges stem from personal weaknesses which all human beings have. Which difficulties do you think the applicant would be most likely to encounter if selected to be a staff member, based on his or her unique challenges?

**Part 2: Rating of Personal Qualities**

No one candidate will excel in all areas listed below. Please candidly evaluate the applicant based on your observed knowledge using the following scale definitions. Please circle one for each category.

| In my opinion, the applicant:                                | Completely Agree | Agree | Somewhat Agree | Disagree | Completely Disagree | No basis for rating |
|--|------------------|-------|----------------|----------|---------------------|---------------------|
| Can be depended on to follow through with responsibilities   | 5                | 4     | 3              | 2        | 1                   | NB                  |
| Seems more mature than peers                                 | 5                | 4     | 3              | 2        | 1                   | NB                  |
| Is considered to be a motivated person                       | 5                | 4     | 3              | 2        | 1                   | NB                  |
| Is perceptive to situations going on in his/her surroundings | 5                | 4     | 3              | 2        | 1                   | NB                  |
| Shows initiative in taking responsibility                    | 5                | 4     | 3              | 2        | 1                   | NB                  |
| Shows leadership capacities                                  | 5                | 4     | 3              | 2        | 1                   | NB                  |
| Demonstrates good problem solving                            | 5                | 4     | 3              | 2        | 1                   | NB                  |
| Would be easily entrusted with the care of my own children   | 5                | 4     | 3              | 2        | 1                   | NB                  |
| Works as a team member                                       | 5                | 4     | 3              | 2        | 1                   | NB                  |
| Would probably respond well in a crisis                      | 5                | 4     | 3              | 2        | 1                   | NB                  |
| Should not be entrusted with children                        | 5                | 4     | 3              | 2        | 1                   | NB                  |
| Has difficulty taking direction from those in authority      | 5                | 4     | 3              | 2        | 1                   | NB                  |
| Is a source of inspiration to others                         | 5                | 4     | 3              | 2        | 1                   | NB                  |
| Gets along well with most people                             | 5                | 4     | 3              | 2        | 1                   | NB                  |

If needed, may we contact you for further information?  Yes  No

Name:

Daytime Phone:

Address:

Email Address:

City, ST/PV:

To the best of my knowledge, all statements made or indicated on this Reference Form are true and represent my honest appraisal of the qualifications of the applicant.

Signature:

Date:

## Camp St. Thekla Staff Policy for Online Social Networking and Blogging Websites

Once a person accepts a position as a member of the staff at Camp St. Thekla, they accept a great responsibility that lasts well beyond the time that one spends at Asbury Hills in South Carolina. Camp St. Thekla staff members will forever be recognized by campers, parents, clergy, fellow staff members, and many others as a representative of Camp St. Thekla and, more importantly, the Orthodox Christian faith.

In general, Camp St. Thekla views social networking sites (e.g., MySpace, Facebook, etc.), personal Web sites, and Weblogs positively and respects the right of staff to use them as a medium of self-expression. With the advent of internet technology and social networking websites, information can be posted on the internet and seen by just about anyone with access to the internet.

Each Camp St. Thekla staff member who posts information (text and photos) on the internet in any format including social networking websites, personal websites, instant messenger profiles and away messages, and any other information posted on the internet, must do so in accord with that of an Orthodox Christian lifestyle. In addition, Camp St. Thekla requires that staff observe the following guidelines when referring to the camp, its programs or activities, its campers, and/or other staff, in a blog or on a Web site:

- 1) Any photos or messages that are linked or "tagged" from "friends" and attached to your site(s) or profile(s) that are inappropriate should be removed.
- 2) Staff must be respectful in all communications and blogs related to or referencing Camp St. Thekla, its campers, and/or other employees.
- 3) Staff must not use obscenities, profanity, or vulgar language.
- 4) Staff must not use blogs or personal Web sites to disparage Camp St. Thekla, other campers, or staff of Camp St. Thekla.
- 5) Staff must not use these venues to discuss engaging in conduct prohibited by camp policies and an Orthodox Christian lifestyle, including, but not limited to, the use of alcohol and drugs, sexual behavior, sexual harassment, and bullying.
- 6) Staff must not post pictures of campers on a Web site without obtaining written permission from the parents of the camper(s).

Any staff member found to be in violation of any portion of this policy will be subject to immediate disciplinary action, up to and including the staff member's voluntary dismissal from the staff at the discretion of the Camp Director.

By signing below, I agree to the policy listed above.

\_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_



**CAMP ST. THEKLA**  
**AUTHORIZATION FOR BACKGROUND CHECK AND VOLUNTARY DISCLOSURE**

SECTION I. RESIDENTIAL HISTORY --Please provide your current and previous addresses of the last seven years, including temporary addresses (school, etc.)

Name: \_\_\_\_\_  
(First, Middle, Last)

Alias/Other: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Social Security # \_\_\_\_\_

Driver's License #: \_\_\_\_\_ State \_\_\_\_\_ Exp. Date: \_\_\_\_\_

(1) Current Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_ County: \_\_\_\_\_ Dates: \_\_\_\_\_

(2) Previous Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_ County: \_\_\_\_\_ Dates: \_\_\_\_\_

(3) Previous Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_ County: \_\_\_\_\_ Dates: \_\_\_\_\_

*(Provide additional addresses on separate sheet if necessary)*

**SECTION II: AUTHORIZATION FOR BACKGROUND CHECK**

I hereby authorize Camp St. Thekla and the agency or agencies it employs for background services, to obtain and release any information pertaining to my background, including any of the services noted below, for employment or volunteer purposes. I hereby fully release, indemnify and discharge my prospective employer or other source providing information from any and all claims, liabilities and/or damages arising out of or relating to any investigation of my background for said purposes.

I further authorize ongoing procurement of the above mentioned background services at any time during my employment (or contract). I also agree that a fax or photocopy of this authorization with my signature be accepted with the same authority as the original.

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

Witness Signature \_\_\_\_\_ Printed Name \_\_\_\_\_

*(Please continue on next page)*

SECTION III: VOLUNTARY DISCLOSURE

1. Have you ever been convicted of any crime of violence against minors, including but not limited to:

- 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 these listed crimes

Yes   No   If yes, please explain (use a separate sheet if necessary): \_\_\_\_\_

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2. 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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3. Are you 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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4. Have your parental rights ever been terminated for reasons involving sexual or physical abuse of children? Yes   No

If yes, please explain (use a separate sheet if necessary): \_\_\_\_\_

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SECTION IV: AGREEMENT I understand that:

1. Camp St. Thekla may deny employment to any person who answers any of the questions numbered 1-4 above in the affirmative.
2. In applying for a camp position, the information which I have furnished on this form is subject to verification, which may include a criminal history check and request from any Central Registry of child abusers.
3. Camp St. Thekla may terminate employment or volunteer service of any person:
  - a. Found to have a history of complaints of abuse of a minor and/or
  - b. Found to 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.
4. This disclosure statement must be updated yearly.
5. Applicant Signature \_\_\_\_\_ Date: \_\_\_\_\_