



## Camp Rising Sun Staff Application Summer 2012



Thank you for your interest in Camp Rising Sun (CRS)! Every year, we are fortunate to recruit volunteers and students that are high-quality, positive and very diverse. We sincerely value the camp community and knowledge gained from this unique experience and hope you will too. Due to the historically large number of applicants received and limited number of positions available, we typically fill positions early each year. For this reason, we strongly encourage you to apply and complete all necessary forms in a timely manner.

**Camp Dates** are: 3:00pm, Saturday, June 23<sup>rd</sup> through 3:00pm Friday, June 29<sup>th</sup> (Teen Camp)  
3:00pm, Friday, July 27<sup>th</sup> through 3:00pm Thursday, August 2<sup>nd</sup> (Kids Camp)

**New applicants** should complete the application in full and submit online ([camprisingsunnm.org](http://camprisingsunnm.org)) by opening the "Staff and Volunteer Application PDF" or return in person to our offices (listed below). Qualifying applicants will be called for an interview.

**Returning applicants** need only complete pages 2,5,7 & 8. Submit your application online or in person.

**Interviews** will begin in early March and continue until all positions are filled. If you are selected to be a member of our camp team, we will notify you via e-mail within three weeks of receiving your references.

**A follow up packet** will be sent to you with either an interim agreement or job specific agreement following your e-mail notification of hire. Receipt of an interim agreement indicates you qualify for more than one position, and your specific placement (i.e. team leader, counselor etc.) will be determined once all the applicants have been interviewed.

**A physical exam** and all other required medical and release forms in the follow up packet need to be received no later than the date listed on the front page of your packet. It is extremely important to adhere to this date for return of all information.

**CRS LEND Students:** CRS partners with UNM in the departments of Occupational Therapy, Speech and Hearing Sciences, Physical Therapy, Special Education, Adapted Physical Education and Exercise Science to provide students an opportunity to receive credit or clinical hours for participation in camp. You need prior approval from your department advisor to participate in the LEND program. On the *first page* of the staff application, *check the box titled 'CRS/LEND'*, *write your banner ID and fill out the last page on the application titled 'Camp Rising Sun LEND student approval form' with your department advisor's signature.* This additional page is required for participation as a LEND student in CRS. All students wishing to receive course credit (including independent study) shall participate in the CRS LEND program.

**All Participants** are required to attend on-site pre-camp trainings; camp session dates; as well as the full commitment of time listed in their agreement. New staff need to attend an additional training (listed below).

**On-site Training Dates:** Teen Camp: 3:00pm Sat., June 23<sup>rd</sup> – 10:00am Mon., June 25<sup>th</sup>.  
Kids Camp: 3:00pm Fri., July 27<sup>th</sup>- 10:00am Sun., July 29<sup>th</sup>.

**New Staff Training:** Friday, June 8<sup>th</sup> 8:30am-12:00pm (*location TBA*) **OR** complete an online training (*TBA*)

Campers arrive at 10:00am promptly following each listed training session, and camp begins. All participants are required to stay overnight from the first training date until the end of the camp session. (see camp dates above)

Please contact us at 272-5142 or [camprisingsun@gmail.com](mailto:camprisingsun@gmail.com) if you have questions





Please return application to:

Camp Rising Sun, CDD  
2300 Menaul NE  
Albuquerque, NM 87107

Positions are limited-apply early!



### Camp Staff Application

Name: \_\_\_\_\_ Date: \_\_\_\_\_ E-Mail: \_\_\_\_\_

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

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

Current Address (if different) \_\_\_\_\_

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

Telephone Number: \_\_\_\_\_ Cell Phone Number: \_\_\_\_\_

Social Security #: \_\_\_\_\_ Drivers License #: \_\_\_\_\_

Mail should be sent to (check one):  Current Address until: \_\_\_\_\_  Permanent Address

Diet (please circle one): no restrictions      vegetarian      vegan      other(explain): \_\_\_\_\_

(Camp food is basic, but reasonable accommodations will be attempted- staff with specific restrictions will need to bring unrefrigerated items to support dietary needs)

Which camp(s) would you be interested in participating?

- Teen Camp  
June 23-29, 2012  
Saturday-Friday
- Kids Camp  
July 27-August 2, 2012  
Friday-Thursday

What position are you applying for (see position descriptions, pg 6)? Medical Support \_\_\_\_\_ Counselor Coordinator \_\_\_\_\_  
Counselor \_\_\_\_\_ Program Coordinator \_\_\_\_\_ Program Specialist (list expertise) \_\_\_\_\_ (Arts & Crafts, Nature,  
Outdoor Education, Theater Tech, Theater Performance, Sports & Games, Ropes, Music, Photography, Martial Arts, Other.),  
Rover \_\_\_\_\_, Aquatics Supervisor \_\_\_\_\_, Lifeguard \_\_\_\_\_, CIT or Peer Coordinator \_\_\_\_\_, Coordinator, Camp  
Assistant \_\_\_\_\_, Camp Assistant \_\_\_\_\_.

Have you attended Camp Rising Sun? \_\_\_\_\_ Yes \_\_\_\_\_ No

If you answered 'Yes,' how many sessions have you attended? \_\_\_\_\_

Do you have any physical or mental disabilities that might prevent you from performing the essential functions of the position for which you are applying?  Yes  No

If yes, do you have specific suggestions as to how we could accommodate your disability? Describe:  
\_\_\_\_\_

Ethnicity- please which best describes your ethnicity.

- |   |                                 |   |
|---|---------------------------------|---|
| American Indian or Alaskan Native<br>Tribe: _____ | Black/African American<br>Asian | Caucasian/White (non-Hispanic)<br>Hispanic/Latino |
| Native Hawaiian/Pacific Islander                  | Bi-racial/ multi-racial         |   |

Check 'CRS-LEND' if you are applying to camp to interview for a Camp Rising Sun-LEND student position and fill out the CRS LEND Approval Form at the end of this application.

- CRS-LEND
- Volunteer/Staff

Banner ID #: \_\_\_\_\_ (For office use only)



**Education- High School and Beyond**

Years	School/City	Major Subjects	Degree

**Employment**

Dates	Employer	Address	Phone/Email	Nature of Work	Supervisor

Indicate any employer you **do not** wish CRS to contact, and list the reason: \_\_\_\_\_

\_\_\_\_\_

**Other Relevant Camp, Volunteer, Child Care, or Autism Experience (add another page if needed)**

Dates	Camp or Organization	Supervisor	Camper or staff?

**References: Please list at least three non-family references.**

Name	Title or Position	Address/City	Phone	E-Mail Address

Write a brief biographical sketch, including specialized training, which might have bearing on the position(s) for which you are applying. (Add another sheet if necessary)

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What contributions do you think you can make at camp?

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Describe your experiences with children with special needs and/or autism.

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What contributions do you think camp can make in the lives of children with autism spectrum disorders?

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What current certification, licensure, or training (*standard first aid, CPR, emergency water safety, lifeguard training, etc.*) do you have which you believe useful to you in the position you are applying for? **Please attach copies of your current cards or certificates.**

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Please list any activities you would like to organize or teach. Beside each activity, list if you can organize or teach as an expert or can assist in teaching. *Examples include: ropes courses, arts & crafts, outdoor skills, hiking, dancing, drama, nature, sports, story telling, yoga, photography, pool, etc.*

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

4. \_\_\_\_\_

Please indicate if you have special skills or training in specific areas (*i.e. CPR, First Aid, Computer expertise, sign language, musical instrument, lifeguarding, etc.*)

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## All Applicants

I authorize investigation of all statements herein, including any checks of criminal record, and release the camp and all others from liability in connection with same. I understand that my agreement must be in writing and signed by the designated camp official. I also understand that untrue, misleading, or omitted information herein or in other documents completed by the applicant may result in dismissal, regardless of the time of discovery by the camp.

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

*All statements become part of any future camp staff personnel file. This form has been drafted to comply with federal laws; however, Camp Rising Sun assumes no responsibility or liability for use of this form.*

## Confidentiality Agreement

As a member of the Camp Rising Sun Staff, I understand that confidential interactions and experiences with our campers and their families will occur, as well as review of private records. Any information I obtain from the camp experience or private records is to be considered highly confidential. The use of such information is subject to normal standards of medical confidentiality. No identifying information about campers is to be revealed in subsequent discussion or writing about the camp experience. General information should not be shared other than for purposes of formal camp evaluation or professional growth.

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

## Liability Waiver

As a volunteer or staff member of Camp Rising Sun, held on the property owned by Manzano Mountain Retreat, I hereby agree to waive any claim for liability against Camp Rising Sun or Manzano Mountain Retreat due to any injury/illness associated with any camp activities. The undersigned is aware of potential risks and agrees that this waiver applies while traveling to and from camp, attending the Camp and participating in any camp programs and events.

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



## Position Description: Camp Rising Sun

**Medical Support (Director, Camp Nurse):** Responsible for the medication management and health care of campers, volunteers and staff participating in the daily life of Camp Rising Sun. Must have current licensure as an RN or MD. Minimum age: 21 yrs.

**Counselor Coordinator:** Supervises counselors and rovers and coordinates daily break schedule, night duty schedule and insures campers are benefitting from the camp experience. Minimum age: 18 yrs.

**Counselor:** Directly responsible for the care of assigned camper(s). This could include supervision, support for daily care, behavior support, and support for successful completion of program activities. Minimum age: 18 yrs.

**Program Coordinator:** Supervises the program specialists and develops the daily program activity schedule, to include individual, group, and all-camp program activities. Minimum age: 18 yrs.

**Program Specialist:** Leads program activities assigned according to your area of program expertise. Along with teaching a specific program area, provide support to relieve counselors during breaks and to fill-in where needed when not leading assigned program activity. Minimum age: 18 yrs.

**Rover:** Provide support where assigned on a daily or hourly basis, supporting campers as a counselor, or supporting program as a program specialist. Minimum age: 18 yrs.

**Aquatics Supervisor:** Responsible for lifeguard supervision and scheduling, pool program activities, and safety of pool participants. Required: Current lifeguard certification. Minimum age: 21 yrs.

**Lifeguard:** Under the direction of the Aquatics Supervisor, responsible for the safety of all who are in the pool area. Required: Current lifeguard certification. Minimum age: 16 yrs.

**CIT or Peer Coordinator:** Supervise and train counselors-in-training or peers to insure positive outcomes in support of campers with autism spectrum disorders (ASD). Minimum age: 18 yrs.

**Coordinator, Camp Assistant:** Supervise, train and schedule daily activities for a crew of approximately 4-6 camp assistants who provide cleaning and minor repair and support to the camp facility and program equipment. Minimum age: 18 yrs.

**Camp Assistant:** Carry out cleaning and minor repair and support to the camp facility and program equipment. Minimum age: 16 yrs.





## Voluntary Disclosure Statement All Camp Staff



Name: \_\_\_\_\_ Birthdate: \_\_\_\_\_  
Last First Middle

Home Address: \_\_\_\_\_  
Street Address City State Zip Code

Social Security #: \_\_\_\_\_ Other Names by Which Known (e.g. Maiden Name): \_\_\_\_\_

Home Phone: \_\_\_\_\_ Business Phone (if applicable): \_\_\_\_\_

Cell Phone: \_\_\_\_\_ E-Mail Address: \_\_\_\_\_

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

Address: \_\_\_\_\_  
Street Address City State Zip Code

Drivers License #: \_\_\_\_\_ State: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

1. Previous Residence(s) for the 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*):
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

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*):

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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 of 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 (*use a separate sheet, if necessary*):

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I understand that:

- a. The camp may deny camp participation to any person who answers "yes" to any of questions 2-6 listed above. If hired or a volunteer participation agreement is completed, and the employer later discovers circumstances that would indicate a "yes" answer to any of the above questions, participation 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: \_\_\_\_\_

**PLEASE RETURN ASAP, POSITIONS ARE LIMITED.**  
Camp Rising Sun, CDD, 2300 Menaul Blvd NE, Albuquerque, NM 87107  
Or via fax to 505.272.3140  
For questions, please contact Somer Wright at 505.272.5142 or 1.800.877.6380.



## Camp Rising Sun LEND Student Approval Form

Student Name: _____	Banner ID: _____
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A completed copy of this form is required for submission with your application for the CRS LEND program. Please obtain your faculty liaison's signature granting your approval to interview for a LEND counselor position, and submit this form to the Center for Development and Disability with your application. Interviews for qualified applicants will be scheduled once all paperwork is obtained.

<b>Camp Session:</b> Teen Camp ____ Kids Camp ____ Either ____
<b>Department:</b> _____ (OT, SHS, PT, SPED, GE, Community, Other*)
<b>Status in Department:</b> Undergraduate(UG) ____ Graduate(G) ____ Non-degree ____

Department & Faculty Advisor	Courses
OT- Heidi Sanders, M.A., OTR/L	<input type="checkbox"/> OCC TH 690 for credit
PT- Beth Provost, P.T., Ph.D.	<input type="checkbox"/> PT 653 for credit
UG SHS- Sandy Nettleton, Ph.D., CCC-SLP	<input type="checkbox"/> SHS 490 for credit
G SHS – Sandy Nettleton, Ph.D., CCC-SLP	<input type="checkbox"/> SHS 551-004 for credit <input type="checkbox"/> Clinical hours
UG SPED- Veronica Moore, Ph.D.	<input type="checkbox"/> SPCD 204 for credit
G SPED.- Susan Copeland, Ph.D., BCBA/Liz Keefe, Ph.D./Cathy Qi, Ph.D.	<input type="checkbox"/> SPCD 595 for credit <input type="checkbox"/> _____
Adapted PE- Cathy Tingstrom, Ph.D.	<input type="checkbox"/> PEP 599 for credit
Other: _____ (*This must be a department that participates in LEND with CRS; contact us if you have questions)	<input type="checkbox"/> _____ (list full course, and whether course is to be taken for credit or no credit)
<input type="checkbox"/> No Department- Community professional seeking CEU's Please specify discipline: _____	

By signing this form, I agree that I have approval to interview for participation in CRS as a LEND student. I also agree that I am available for, and commit to attending all trainings, and the camp session designated in full, should I be accepted as a CRS LEND student.

\_\_\_\_\_  
Faculty Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Practicum Director Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

