



First Time Ministry Application 2018

**Ministry applications, Criminal Record Checks and Reference Forms can be printed but not filled out 'online' (bethelgospelcamp.ca)

CHECK LIST:

1. **REFERENCES:** Have your **three references** fill out the reference forms and: (A) Send to Bethel Gospel Camp
Box 2583
Meadow Lake, Sask.
S9X 1Z6
or
(B) Give them to one of your **camp reps** **or** (C) drop them in the **Bethel Camp mailbox** in one of the sponsoring churches (Alliance, Efree, Compass, Northwest Community Church)
2. **CRIMINAL RECORD CHECK:** Read the instructions for the attached **Criminal Record Check** (a 'filled out' **CRC** is included in this pkg. to help you if needed)
(A) Fill it out and take it to the **RCMP** by **Tues.** at 4:00 pm and pick it up on **Friday** **or**
(B) Give it to one of your **camp reps** **or** (C) Put it in the **Bethel Camp mailbox** and **David Blatz** will deliver it to the RCMP and pick it up.
3. **SEND:** (A) Send the **completed application** along with your **Criminal Record Check** to the Bethel address (above in #1C) or use the **Camp Mailbox** in your church.
Or (B) If **David Blatz** has your Criminal Record Check, just send in your **application**.
4. We will confirm with you our decision.
5. **Thank you** for being willing to go through this lengthy process to work at Bethel Gospel Camp.
**Stop in at the *Bethel office* at the *Northwest church* (Mon-Fri: 10-5) if you have questions or would like to drop off your forms personally.

See you this summer!



Ministry Application Form 2018

*For those applying for the first time to serve at Bethel Gospel Camp
(Information received is strictly confidential)*

We recognize that this Ministry Application Form is extensive. We wish we did not have to ask many of these questions. However, to adhere to our insurance conditions, and to minimize the risk of abuse within BGC ministries, we believe this information is necessary to protect our campers and our staff. Thank you in advance for your understanding and thank you for giving your time and for using your gifts and abilities to further God's kingdom.

Full name _____ Male ___ Female ___

Date of birth _____ Hospitalization # _____

Single ___ Married ___ Engaged ___ Separated ___ Divorced ___ Remarried ___ Widow/Widower ___

Spouse's name (if applicable) _____

Mailing address _____

Phone: (H) _____ (W) _____ (Cell) _____ Email _____

Grade completed ___ Post-secondary: Years completed ___ Degree received _____

Present occupation and/or employer _____

Hobbies, interests, or skills _____

Are there additional courses or training that you have received that would better equip you for this ministry?

Position you are applying for _____

Indicate whether you are applying as a: Volunteer _____ or Paid Staff _____

Camp dates you are applying for (note some dates overlap):

Bethel Camp (Jeanette Lake)

DIY Work Camp (July 5-8) _____ Teddy Bear 2 (Aug. 8-10) _____

Teddy Bear #1 (July 11-13) _____ Children's 4 (Aug 13-17) _____

Children's 1 (July 16-20) _____ Junior Teen (Aug 20-24) _____

Children's 2 (July 23-27) _____ Senior Teen (Aug 27-31) _____

Children's 2 (July 30- Aug 3) _____ Senior Teen **Canoe** Camp (Aug. 6-10) _____

**** Staff Training is July 1-4. This is mandatory for counselling staff and open to other staff.**

Do you attend a church? _____ If 'yes' what church do you attend? _____

How long have you attended? _____ Do you attend regularly (2 or more services a month)? _____

When did you accept Christ as your Saviour? _____ Have you been baptized? Yes ___ No ___

In a brief paragraph, please outline your spiritual journey: (If space is inadequate please attach separate page)

List your spiritual gifts (if you know them) you or others have identified in your life _____

Areas of ministry you are interested in _____

Please list present and previous ministry involvement (include previous experience with BGC):

1. Name of church or organization _____

Date and description of ministry _____

2. Name of church or organization _____

Date and description of ministry _____

3. Name of church or organization _____

Date and description of ministry _____

4. Other _____

In order to provide a safe and secure environment for our children, we believe it is necessary to include the following questions as part of our application process. All information will be kept confidential (police may access this information under warrant if requested). Answering “yes” to any of the questions does not necessarily preclude your involvement in ministry. Thank you for your understanding.

Have you had any painful experience (personal abuse in any form) that has better equipped you, or may hinder you from a productive ministry with children or youth? _____

If yes, please explain _____

Have you had any counselling regarding this circumstance? _____

Have you ever pled guilty to or been convicted of the use or sale of drugs? _____

If yes, please explain (*) _____

Have you ever been hospitalized or treated for alcohol or substance abuse? _____

If yes, please explain (*) _____

Have you ever pled guilty to or been convicted of any sexually related offences? _____

If yes, please explain (*) _____

Have you ever pled guilty to or been convicted of any abuse related offences? _____

If yes, please explain (*) _____

Are there circumstances involving your lifestyle or background that would call into question your ability to work with children or youth? _____

If yes, please explain (*) _____

Do you have a medical or psychiatric history or condition that may be relevant to your working with children and youth? _____

If yes, please explain (*) _____

Do you have any physical conditions that would prevent you from performing certain types of activities? (lifting children, playing sports etc.)? _____

If yes, please explain _____

Please provide the names of three individuals, excluding relatives, who could provide a reference for you. Include at least one reference from **outside your church**. Please include e-mail addresses if possible. These references may be contacted.

1. Name of reference _____ Phone # _____

Address _____

Email _____

2. Name of reference _____ Phone # _____

Address _____

Email _____

3. Name of reference _____ Phone # _____

Address _____

Email _____

BETHEL GOSPEL CAMP

RELEASE OF INFORMATION AND DECLARATION OF INTENT

I hereby give Bethel Gospel Camp permission to contact persons named as references to ascertain my suitability for ministry. I release all such references from liability for any damage that may result from furnishing such evaluations to you.

I also grant permission for Bethel Gospel Camp to perform a personal criminal record check, if deemed necessary, for purposes of my protection against false allegations and for the protection of those I serve. I consent to such an investigation with the understanding that the results will be kept in extreme confidence. I agree to adhere to the protection guidelines as adopted by Bethel Gospel Camp.

I understand that if my character or morals should be deemed inappropriate and/or criminal at any time during my service, Bethel Gospel Camp will be entitled to terminate my position without expressed cause or prior notice regardless of any oral or written statement by Bethel Gospel Camp prior to, at, or following the date of service.

I understand that Bethel Gospel Camp is responsible for the welfare of any person or persons entrusted to my care, and thus I will cooperate fully with the staff in the fulfillment of my duties and will keep all information I encounter in my ministry confidential. If at any time, I find that for any reason I am unable to support the policies, procedures or doctrine of Bethel Gospel Camp, I will graciously and quietly resign my position. If my supervisors find that I am in conflict with any of the policies, procedures, or doctrines and we are not able to resolve the issue, I will graciously and quietly agree to resign my position.

I hereby acknowledge that the information contained in this application for ministry is correct to the best of my knowledge.

Signature of applicant _____

Date _____

Signature of witness _____

Date _____

Staff Reference Form

_____ has applied to work at **Bethel Gospel Camp** and has indicated on his/her application that you might be willing to act as a personal reference. We have a program in our camp called "plan to protect" which is required by all insurance companies and is designed to protect the children and youth as well as the workers. We do a reference check on all workers. Your response will remain confidential. Thank you for your co-operation. Please forward this information to: Bethel Gospel Camp, Box 2583, Meadow Lake, Sask. S9X 1Z6 or drop it in the Bethel Camp mailbox of one of the sponsoring churches.

Your Name _____ Phone _____

Address _____ City _____

Postal Code _____ E-mail _____

1. Describe your relationship with this person?

2. How long have you known this person?

3. Please use the following scale to respond to the following:

X – no comment 1- low 2 - below average 3 - average 4 - very good 5 - excellent

How would you rate this individual in the following areas?

A) Ability to work with others X 1 2 3 4 5

B) Ability to follow through on commitments X 1 2 3 4 5

C) Ability to relate to children or youth X 1 2 3 4 5

D) Level of spiritual maturity X 1 2 3 4 5

4. What are the applicants greatest strengths as you see them?

5. Would you entrust the care of your child or youth to the applicant without concern, reservation or hesitation?

6. Do you have any concerns regarding this person working with children or youth? If so, please explain:

Signature _____ Date _____

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Signature _____ Date _____



Box 2583
Meadow Lake, SK
S9X 1Z6
Phone: 306-304-7288
Fax: 306-236-6957

Criminal Record Check Application Letter

Date: _____

Dear Sir or Madam:

_____ is applying for a position of trust in our organization. It is our policy to have a Criminal Records Check done on all of our staff and volunteers. I am requesting that a Criminal Records Check be done for this individual in order for him/her to volunteer at Bethel Gospel Camp.

Name of Organization:	Bethel Gospel Camp
Program:	Summer Camp
Contact Person:	David Blatz
Phone:	306-240-7862 (cell)
Fax:	306-236-6957

Thank you for your attention in this matter
Sincerely,

David Blatz
Executive Director, Bethel Gospel Camp