#### **MAIL APPLICATION TO:**

LACOG Youth Camp 2022 12005 Coursey Blvd. Baton Rouge, LA 70816

\* A copy of your government issued photo ID must accompany this application.

# LACOG 2024 Youth Camp Staff Application

# FOR OFFICE USE ONLY

Date Received:
CBG Check:
Camp Counselor:
Area Working:
T-Shirt Money Received:
T-Shirt Size:
Approval Email Sent:

Email: coglasec@gmail.com Office Phone: 225.293.0165 Ext. 211 Website: www.lacog.org

Have you worked cam	p in the past before?	Yes No		
Are you a credentialed	minister in the Chui	rch of God? Yes _	No	
FIRST NAME		MI	_LAST NAME _	
ADDRESS		CITY		STATEZIP
PHONE NUMBER ( _				
EMAIL ( <i>Required</i> ) _				
HOW LONG HAVE Y (IF LESS THAN 2 YEARS	OU LIVED AT THI , LIST PREVIOUS) AD	S ADDRESS? DRESS		
SSN	(REQUIRED FOR BAC	CKGROUND CHECK)		
BIRTH DATE/_			Σ	
MONTH / DA				STATE / COUNTY
MALE FEM	[ALE	MARRIED	SINGLE	
DRIVER'S LICENSE	#	STATE	FORMER NAM	MES
enforcement agencies a	ny information which ner local, state, nation	pertains to any	record of conviction	State of Louisiana to seek from local law on on its files or in any criminal file any police department from any and all
SIGNATURE ( <i>Reqi</i>	uired)			
. 1	,			
	SP	IRITUAL INFO	ORMATION	
	Please	list the year, if know	n, and if applicable.	
SAVED	SANCTIFIED		BAPTIZED	IN HOLY GHOST
WATER BAPTISM		CHURCH MEMBI	ER	
NAME OF CHURCH YOU	I ATTENDO			
NAME OF CHURCH YOU HOW LONG HAVE YOU				
ite ii Ediid iii ve 100 i				
PASTOR'S NAME		ΡΔ SΤ	OR'S SIGNATURE	

It is the responsibility of the Senior Pastor to return the Confidential Senior Pastoral Staff Endorsement form provided by the applicant prior to the processing of this application.

# EDUCATIONAL BACKGROUND

# Enter highest number completed.

ELEMENTARY (K-5) MIDDLE SCHOOL (6-8) HIGH SCHOOL (9-12) COLLEGE (1-4) GRADUATE SCHOOL Applicants are not required to provide information which is prohibited by Federal, State, or Local law. This application is given every consideration, but its receipt does not imply that the applicant has been accepted as a camp worker. Applicants are accepted on a "trial basis" and if, in the final judgment of the camp officials it is found that the applicant/staff worker is not adaptable to the assignment and cannot be reassigned, or that the information given has been misrepresented, the acceptance of this application can be terminated without cause or reason. In addition, investigation will be made as to your character, general reputation, personal characteristics, and adaptability to the particular position assigned. All applicants are required to undergo training and orientation provided by the State Youth and Dissiplachin Googlington's Office and under the supervision of the State Youth and Dissiplachin Board.
and Discipleship Coordinator's Office and under the supervision of the State Youth and Discipleship Board.
GENERAL REQUIREMENTS FOR YOUTH CAMP STAFF
<ul> <li>Must be at least 18 years old</li> <li>Must be a born again believer</li> <li>Must be a regular attendee of your local church</li> <li>It is preferred, but not required, that all counselors be baptized in the Holy Ghost.</li> <li>Must have the Youth Camp 2024 Confidential Pastoral Staff Endorsement Form submitted by your pastor</li> </ul>
POSITION PREFERENCE (not guaranteed, but taken into consideration)
CounselorCo-CounselorCanteen/Camp StoreSound/MediaRec StaffCamp Safety TeamKitchen StaffNurse (RN, LPN, or EMT)Janitorial StaffLifeguard
CAMPS YOU WISH TO WORK (check all that apply)
☐ JUNIOR CAMP (7-12) ☐ TEEN CAMP (13-19)
CHILDREN UNDER YOUTH CAMPAGE
Due to limited space and to allow each staff member to fully devote their time and energy to their area of responsibility, we are unable to provide child care at Youth Camp. Prior to your arrival at camp, please make other arrangements for the care of your children under the age of 6 years old.
CHURCH INVOLVEMENT AND YOUTH CAMP INVOLVEMENT
List all previous opportunities where you have served in a church setting involving youth/children. (List each organization's name and address, duties performed, and dates you served in that capacity)
What made you decide to work camp this year? What part of the camp position/work do you most look forward o? What years have you worked camp? Doing what?

#### IF YOU ARE APPLYING FOR A COUNSELOR POSITION 1. Will your child be a camper? Yes No If yes, do you want your child to be in your cabin? Yes ☐ No 2. Will campers from your church be attending camp? Yes ∃Nο If yes, should they be placed in your cabin? Yes ☐ No PERSONAL INFORMATION & BACKGROUND 1. Have you ever been charged, arrested, convicted 11. Do you have recurring nightmares or sleep of, or pleaded guilty to any crime? ☐ Yes ☐ No If yes, would you be willing to discuss this matter 12. Do you have a history of use of pornographic with a pastor or ministry leader? Yes No 2. Have you ever been accused, charged, or alleged 13. Have you been charged with moving traffic to have committed any act of neglecting, violations within the last 5 years? abusing, or molesting a child or youth? Yes ☐ No Yes No If yes, please explain when and why: If yes, would you be willing to discuss this matter with a pastor or ministry leader? Yes No Has your driver's license ever been revoked or suspended? Yes No 3. Have you ever been a victim of abuse (verbal, physical, or sexual)? Yes No If yes, please explain when and why: If you prefer, you may discuss this answer with a pastor or ministry leader. Answering "Yes" or leaving 15. Are you presently employed? it unanswered would not automatically disqualify you ☐ Yes ☐ No from the privilege of working in any ministry capacity. However, you may be asked to clarify your response. If yes, where? Job Description: Have you ever been involved in homosexual 4. How long?\_\_\_\_ activities? \( \subseteq \text{Yes} \quad \subseteq \text{No} \) 16. May we contact your employer? $\square$ Yes $\square$ No If yes, would you be willing to discuss this matter with a pastor or ministry leader? Yes No Supervisor's Name: Phone (\_\_\_\_\_\_ Have you ever been accused, charged, or alleged 17. Are you presently under a doctor's care for any to have committed a theft? ailments? Yes No ☐ Yes ☐ No. If yes, Physician's Name:\_\_\_\_\_ If yes, would you be willing to discuss this matter Phone (\_\_\_\_\_\_\_\_\_\_ with a pastor or ministry leader? Yes No List any prescription medications & reasons for 6. Are you addicted to prescription drugs? taking them: ☐ Yes ☐ No 7. Do you use tobacco in any form? Yes No

19. List any allergies and reactions

8.

9.

Do you drink alcoholic beverages, including

Do you take illegal drugs? ☐ Yes ☐ No

10. Do you have problems sleeping? ☐ Yes ☐ No

social drinking? Yes No

Cor Poli <b>21</b> . Lis	you carry any personal medical in Yes	to be above questions above Signature:  Your Signature:	, I am stating that the answers to the are correct to the best of my ability.
	PE	RSONAL REFERENCES	
NAME ADDR PHON		ADDRESS PHONE ()	
Youth application	no one is rejected to work or attend (and Discipleship Director and State Vation for volunteer work at Church (and the control of the control	Church of God youth camps on the bas fouth and Discipleship Board does rese of God youth camps after reviewing to be in the best interest and success of the	is of race, color, or creed, the State rve the right to accept or reject any of said application reveals that the
	APPLICANT'S WAIVE	R/RELEASE & VOLUNT	EER STATEMENT
voluntarily agents, and	release and discharge the aforer employees, from any and all liabil	nentioned church/camp, along wit ity for personal injury, property dan	organization mentioned above, I hereby h its constituent organizations, officers, nage, or wrongful death that may occur as gence on the part of any named entity or
I also pledg	ge to indemnify and hold harmles	s the church/camp and its officers,	r instructions from supervisory personnel. agents, servants, or employees from any sustained during my volunteer work.
insurance o	r other benefit plans. I authorize		enses incurred, which may be covered by ographs taken during my participation in
I release an		lved in processing my application	derstand its terms and legal implications. from liability arising from the release of
provided by arrive befo	the Louisiana Church of God Stare the designated check-in time	e Youth and Discipleship Director's	es and to participate in training programs office. I will ensure that campers do not to bring them, allowing me to attend if the conclusion of the camp.
I acknowle	dge that I have read and unders	and the contents of this release, a	nd I sign it of my own free will.
Applicant Sig	gnature	Date	
Witness Sign	ature	Date	

### CAMP LOCATION/STAFF CHECK-IN

Camp Cypress 4160 Hwy 35 South, Forest, MS 39074

STAFF CHECK-IN: 10:00 AM on MONDAY, JULY 22

# **SUPPLY LIST**

- \* Bible
- **★** Pencil/Pen/Notebook
- \* Twin Size Bedding/Blanket/Sleeping Bag/Pillow
- \* Flashlight & Umbrella
- **★** Soap/Toiletries
- \* Towels/Washcloths
- \* Dirty Clothes Bag
- \* Swim Suit & Cover-Up/Shirt
- \* Clothing for service
- \* Two pairs of tennis shoes (one may get wet)
- **★** Slides/Flip Flops
- \* Old shirts and shorts for outdoor activities
- \* Sweatshirt or Light Jacket
- **★** Insect Repellent
- \* Hat / Sunscreen
- \* Spending Money for Canteen

### **MEALS**

With such a wide variety offered during meal times and at the canteen, you will have plenty of dining options! If you have special dietary needs or restrictions you may bring food and place it in the staff refrigerator located in the cafeteria. We ask that you eat your meals at the designated times.

# **CELL PHONES & VISITORS**

We ask that you please be mindful if you are responsible for campers and not be on your phone or social media unless necessary. If you will have a visitor during camp, you will need to make the Camp Director aware before their arrival. Upon arrival, all visitors must report to the Camp Office to sign in and receive a visitor badge.

Visitors hours are during service times only.

### **VOLUNTEER ORIENTATION**

Mandatory Volunteer Orientation will take place Monday, July 22, in the main worship center at 10:00 AM. Orientation will is required for all LA Youth Camp Staff and Volunteers! Please be on time for 10 AM.

# WHAT TO WEAR

Louisiana summers are hot! Appropriate summer clothing is encouraged to beat the heat. But, don't forget to practice modesty and KEEP IT COVERED! Youth Staff will be asked by the Head Counselor to change their clothes in the case of a violation of the expected dress code, which includes short shorts & skirts, uncovered stomachs, spaghetti straps, clothing with inappropriate/vulgar language, and any other clothing deemed immodest by the Head Counselors. What to bring:

- \* Short Sleeve Shirts
- \* Tank Tops (NO SPAGHETTI STRAPS)
- \* Modest Length Shorts (Running shorts with compression shorts underneath are permitted; shorts should come to the tips of fingertips when arms are fully extended by their sides at minimum)

# WHAT NOT TO WEAR

- \* Spaghetti Strap Tops
- \* Low Cut Shirts
- **★** Halter/Strapless Tops
- \* Crop Tops (NO STOMACHS SHOWING)
- \* Short/Mini Skirts
- \* Short Shorts/Skirts
- **★** Biker Shorts/Spandex
- \* Bikinis/Cheeky Swim Suits

# WHAT NOT TO BRING

- \* Anything valuable that might be lost or damaged
- \* iPods, iPads, AirPods, Laptops, etc.
- \* Weapons
- \* Tobacco, Drugs, & Alcohol
- **\*** Fireworks

Please be aware that LACOG nor the campground will be responsible for lost or stolen items.

# **CANTEEN**

Snacks and drinks will be available at the canteen. We recommend, if possible, \$5-\$10 per day for snacks and other items at the camp store, including candy-grams. We want to provide a secure place for all cash brought to Louisiana Church of God Youth Camp. For this reason, you may choose to pre-pay for a canteen bracelet or pay with cash at time of purchase. All canteen monies returned with an application will be given to the you in the form of canteen bracelet.

Used bracelets will not be refunded.

### 2024 LACOG Youth Camp

### Confidential Pastoral Staff Endorsement Form For Prospective Youth Camp Staff

This form must be completed by the respective Pastor of the Youth Camp Staff Applicant.
All information disclosed on this form will be kept strictly confidential.

**PLEASE PRINT** 

	NAME OF APPLICANTPASTORPASTOR									
	W WELL DO YOU I									
	_					know this person				
W	OULD YOU RECOM	MEND THE APPLI	ICANT TO SERV	E AS YOUTH	CAMP S	TAI	FF?			
	Highly Recommend	Recomme	end 🗆 Do	Not Recommend	1					
If y	ou recommend this in one number on e	ndividual to work in ach of the following				cing	g a ci	rcle	around	
5 - 5	Strongly Agree; 4 - Agree	e; 3 - Disagree; 2 - Stro	ngly Disagree; 1 - N	o Opinion on this	Item/not a	pplic	cable.			
This in	dividual									
1.	is responsible an	d trustworthy.			5	4	3	2	1	
2.	has a good attitu	de.			5	4	3	2	1	
3.	works well with others.				5	4	3	2	1	
4.	is faithful in tithing and attendance to our church.				5	4	3	2	1	
5.	has had experience working with youth and children in my church.				5	4	3	2	1	
6.	can work through problems without getting frustrated and giving up.				5	4	3	2	1	
7.		e, has never displayed s not been convicted o		tionable	5	4	3	2	1	
8.	would make a go	ood counselor at cam	p.		5	4	3	2	1	
9.	is an asset and n	ot a liability to our loo	cal church.		5	4	3	2	1	
10.	is in good physic	al condition.			5	4	3	2	1	
11.	appearance is ne	eat and well groomed			5	4	3	2	1	
	check yes or no to th	e following question	ıs:							
12.	is born again		Yes	No						
13.	is a member of m	ay local church	Yes	No						
14.	has the Baptism	•	Yes	No						
15.	has the Baptish	,	Yes		_N/A					
Pastor	's Signature		)ate	Ministerial	File#					

Please be sure to include your Ministerial File Number as verification that you have personally filled out this endorsement.