



## SUMMER CAMP 2012

2247 Little Piney Road - Lowesville, VA 22967  
Phone (434) 277-8465 Fax (434) 277-5901 E-mail: [crossroads@crossroadsgccc.com](mailto:crossroads@crossroadsgccc.com)  
[www.crossroadsgccc.com](http://www.crossroadsgccc.com)

### STAFF

Reuben Todd—CrossRoads Camp and Conference Center Director  
Nicole Todd—Office and Communications Administrator  
Chad Davidson—Facilities Manager

### DATES OF EMPLOYMENT 2011

June 9—August 5

(May ? for Leadership Team)

Note: some male counselors are only needed on CoEd weeks

\***Any** applicant unable to attend pre-camp training on June 9-18  
must attend alternate training session at CrossRoads on May 25-28.

We invite and sincerely hope all summer staff will attend  
May 25-28 weekend training.

### BENEFITS

\$105-150 per week depending on experience and position  
Health & accident insurance  
Room & board provided including weekends  
Opportunity to apply for a tuition scholarship for upcoming school semester

### TRAVEL EXPENSES

Mileage paid at .35 per mile from the point you cross the Virginia State line  
(only 1 roundtrip included)  
Pickup from nearby airports can be arranged

### LOOKING FOR

Applicants that have a personal relationship with Christ  
Applicants that have a passion for missions  
Applicants that put children first  
Applicants that can be flexible  
Applicants that want to try/learn new things

### AGE

College & Seminary students are hired first  
High School rising seniors hired second  
Preference given to high school students who are 18 before June 11th  
All summer staff must be **at least** 16 before June 11th

### CAMP DATES

Week	Dates	Camp
One	June 18-23	Girls
Two	June 25-30	CoEd
Three	July 2-7	CoEd/Family
Four	July 9-14	Girls
Five	July 16-21	CoEd/Family
Six	July 23-28	Girls
Seven	July 30 - Aug 4	CoEd



Please attach  
a recent  
photograph

CrossRoads Camp and Conference Center  
2247 Little Piney Road  
Lowesville, VA 22967  
crossroads@crossroadsccc.com

Reuben Todd, CrossRoads Director  
crossroads@crossroadsccc.com  
Office- (434)277-8465  
Fax- (434)277-5901

## APPLICATION FOR SUMMER EMPLOYMENT—Returning Staff

Please print in ink or type and return to CrossRoads as soon as possible. Before an interview can be scheduled, all questions must be answered with references listed. Please make sure a recent photograph is included.

Check positions you may be interested in:

Boys/Girls' Counselor  Support Staff  Lifeguard  Track Leader

### PERSONAL INFORMATION

Name:	Date of Birth: ___/___/___ Age: _____
College Address:	City: _____ State: _____ Zip: _____
Phone Number at College: ( )	E-mail: _____
Home Address:	City: _____ State: _____ Zip: _____
Home Phone Number: ( )	Cell: ( )
Driver's License #: _____ State: _____	Social Security Number: _____
Parents'/Guardians' Names: _____	To which of the above addresses should correspondences be sent?

### EDUCATIONAL BACKGROUND

Name of School Attending:	Freshman: _____ Sophomore: _____ Junior: _____ Senior: _____ Graduate: _____
Major/Minor:	Grade Point Average: _____
Degree:	Tentative Vocational Choice: _____

**EXTRA-CURRICULAR INVOLEMENT**

Organizations you have been involved in the past year:	Offices held and/or responsibilities:
Honors received in the past year (school and community):	

**CAMPING BACKGROUND**

Were you a camper at CrossRoads?	If yes, how many summers?
Were you an LIT at CrossRoads?	If yes, how many years?
List the summers you have worked at CrossRoads and positions held:	

**TALENTS/ABILITIES**

Number the Tracks below in order that matches your interest and abilities best:

\_\_\_ Mountaineering \_\_\_ Culinary \_\_\_ Archery \_\_\_ Horsepower \_\_\_ Creative Ministries  
 \_\_\_ Beauty/Poise/Fitness \_\_\_ Sports \_\_\_ Backpacking \_\_\_ Fishing

What musical instruments do you play?

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What sports do you play?

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Please list any other skills you possess that could be beneficial to summer camp at CrossRoads.

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**MEDICAL HISTORY**

Do you have any health issues that you feel we should be aware of that could impact your ability to perform all camp duties?

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**CERTIFICATIONS**

Put a check next to any areas below where you have certification, experience, or college credit and explain. If you have been certified, please list expiration date.

<input type="checkbox"/> First Aid-	Expiration Date:
<input type="checkbox"/> CPR-	Expiration Date:
<input type="checkbox"/> Other Health Related-	Expiration Date:
<input type="checkbox"/> Lifeguarding-	Expiration Date:
<input type="checkbox"/> Adventure Recreation-	Expiration Date:
<input type="checkbox"/> Additional Certifications-	Expiration Date(s):

**EMPLOYMENT HISTORY:** (If applicable, please give information on your most current job held)

Name of Business:	Supervisor:
Phone Number:	Position Held:
City and State:	Duties Performed:
Dates Employed From: To:	Personal Rating of Performance: (1-10; 10 being excellent)

**REFERENCES:** (Print copies of the attached reference form and give to two people who have been in contact with you **during the past year**. List your references below. Have them send the reference forms to CrossRoads as soon as possible.)  
 One Christian Leader (Pastor, Youth Pastor, Bible Study Leader, Campus Minister, etc.):  
 One Other Adult (not a relative or minor):

Name:	Position:
Phone Number:	Address:
City:	State and Zip:

Name:	Position:
Phone Number:	Address:
City:	State and Zip:

**PERSONAL STATEMENTS:** (Please answer the following questions on another sheet of paper and attach.)

- A) Describe the major differences between your life at camp and your life the rest of the year?  
 B) How could/should they be more alike?
- What has God taught you recently, and how?
- A) How has God used you since camp ended?  
 OR B) How has the presence of Christ shown through you since camp ended?
- Write a new devotion that you could share based on a real event or observation in your life.
- What kind of devotion/personal time can you commit to as you prepare for camp (not some 'ideal' of 2-3 hours daily, but a real, possible step that God is calling you to **commit** to as you prepare? Post your answer in your room where you will see it and be reminded/convicted of your commitment.  
 I made and posted a commitment for personal devotion
- Would you be available to work May 25-28, June 9-August 5? If not, please explain the dates and reason you will be unavailable.

By signing below, I certify that all of the information in this application is accurate. I authorize CrossRoads Camp and Conference Center to obtain information from employers, references, organizations, and churches listed herein that may know my qualifications for employment. I also hereby release CrossRoads Camp and Conference Center, employers, references, organizations, or churches from any legal liability in making such statements.

In the event that I am hired, I understand that I will be required to submit to a criminal background check in keeping with the Woman's Missionary Union of Virginia's procedures.

I understand that this application is not a contract of employment.

\_\_\_\_\_  
 Signature

\_\_\_\_\_  
 Date

**Please mail completed application to:**  
 CrossRoads Camp & Conference Center, Attn: Reuben Todd, 2247 Little Piney Road, Lowesville, Virginia 22967



# CrossRoads Camp & Conference Center Reference Form

Please complete and mail or fax to:  
 2247 Little Piney Road  
 Lowesville, VA 22967  
 Attn: Reuben Todd  
 (434) 277-8465 fax: (434) 277-5901  
 www.crossroadsccc.com  
 email: crossroads@crossroadsccc.com

Name of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_  
 Person Completing Reference form: \_\_\_\_\_

The above named Applicant is being considered for employment for summer camp at CrossRoads Camp and Conference Center, and has granted permission for us to obtain information concerning his/her character and abilities. Your confidential answers will help us in our evaluation of this applicant. Thank you for your assistance.

Please circle the number that best describes your perception of the Applicant, using a 1-10 scale with 1 being significant room for growth, 5 being average, and 10 being superior.

How long have you known the Applicant?	What is your relationship?
How well do you know the Applicant? ___acquaintance ___casually ___well ___very well	What level of communication have you had with the Applicant in the last year? ___none ___little ___personal

General Attitude	_____	n/a	1	2	3	4	5	6	7	8	9	10
Ability to get along with others	_____	n/a	1	2	3	4	5	6	7	8	9	10
Communication	_____	n/a	1	2	3	4	5	6	7	8	9	10
Trustworthiness/Dependability	_____	n/a	1	2	3	4	5	6	7	8	9	10
Honesty	_____	n/a	1	2	3	4	5	6	7	8	9	10
Judgement	_____	n/a	1	2	3	4	5	6	7	8	9	10
Cooperation	_____	n/a	1	2	3	4	5	6	7	8	9	10
Work Ethic	_____	n/a	1	2	3	4	5	6	7	8	9	10
Flexibility	_____	n/a	1	2	3	4	5	6	7	8	9	10
Teamwork	_____	n/a	1	2	3	4	5	6	7	8	9	10
Leadership	_____	n/a	1	2	3	4	5	6	7	8	9	10

Social Awareness	n/a	1	2	3	4	5	6	7	8	9	10
Emotional Maturity	n/a	1	2	3	4	5	6	7	8	9	10
Spiritual Maturity	n/a	1	2	3	4	5	6	7	8	9	10
Physical Health	n/a	1	2	3	4	5	6	7	8	9	10
Personal Hygiene	n/a	1	2	3	4	5	6	7	8	9	10

Please put a check beside any of the following tendencies which may be present in this Applicant:

impatient	<input type="checkbox"/>	domineering	<input type="checkbox"/>	anxious	<input type="checkbox"/>
depressed	<input type="checkbox"/>	quick tempered	<input type="checkbox"/>	boastful	<input type="checkbox"/>
critical of others	<input type="checkbox"/>	lazy	<input type="checkbox"/>	difficulty accepting positive criticism	<input type="checkbox"/>
lacks humor	<input type="checkbox"/>	easily embarrassed	<input type="checkbox"/>	easily offended	<input type="checkbox"/>
frustrated easily	<input type="checkbox"/>	intolerant of other races/nationalities	<input type="checkbox"/>	prone to discouragement	<input type="checkbox"/>

Please write any additional comments below (use another page if necessary) about the Applicant that you feel needs to be addressed and/or explained.

\_\_\_\_\_  
Please identify the Applicant's strengths.

\_\_\_\_\_  
Please identify the Applicant's weaknesses.

\_\_\_\_\_  
Would you allow your child to be under this Applicant's supervision? Why or why not?

Overall how do you rate this Applicant? (check as many as you feel appropriate.)

- \_\_\_\_ must hire this Applicant
- \_\_\_\_ with the proper training, will do very well
- \_\_\_\_ a self starter; will be a real asset
- \_\_\_\_ in another setting I think they will do fine
- \_\_\_\_ not sure how they will relate to children and other staff members
- \_\_\_\_ may need another year to mature
- \_\_\_\_ problems at home might make this a difficult job for them
- \_\_\_\_ other \_\_\_\_\_

DATE \_\_\_\_\_ SIGNATURE \_\_\_\_\_

POSITION \_\_\_\_\_

PHONE (\_\_\_\_) \_\_\_\_\_ E-MAIL \_\_\_\_\_

**Thank you for assisting us as we seek to hire the CrossRoads' summer camp staff. If needed, can we contact you with further questions about this applicant? YES NO**

Please return this form to us via fax or mail:

CrossRoads, Attn: Reuben Todd, 2247 Little Piney Road, Lowesville, VA 22967

Fax: (434) 277-5901