

**Boone's Creek Baptist Camp
Summer Volunteer Application**

Applicants under 18 years of age require minor's release

Personal Information

Name: _____ Date: _____

Home Address: _____

City: _____ State: _____ Zip: _____

Phone: () _____ Cell Phone: () _____

E-mail Address: _____ Social Security Number _____

Age: _____ Birth Date: _____ Current Year in School: _____

Parent's Names: _____

Why do you want to volunteer? _____

Education Information

School Attending or Completed: _____

(Please List below Dates and Degrees received if course of study is completed)

Remarks

Signed: _____ Date: _____

Volunteer Personal Reference Form

Dear Pastor:

_____ has indicated that he/she will work as a Volunteer at Boone's Creek Baptist Camp on (Date)_____. Would you please take a few minutes to complete this questionnaire in regards to his/her qualifications and abilities. Thank you in advance for your attention to this matter.

1. How long have you known the applicant? _____
2. What is your relationship with the applicant? (i.e. Pastor, Supervisor, Sunday School Teacher) _____
3. Please list your knowledge of this applicant that would be indicative of his/her abilities to work with youth and children in a Christian oriented environment and to share Christ with them.

4. Please rate the applicant in the following areas with a score of 1-10 (1 being poor and 10 being excellent)(uk is unknown)

Faithful in church attendance _____ Active in home church _____ Ability to work with youth and children _____
Gets along with other people _____ Trustworthiness _____ Reliability _____ Follows orders _____ Eagerness and
Enthusiasm _____ Works well within a group _____ and/or on his/her own _____ Respects persons in leadership
roles _____ Willingness to accept responsibilities _____ Ability to share their Christian Witness _____ Lives out their
Testimony _____ (to the best of your knowledge)

5. Can you, without reservation, recommend this person for a volunteer position at Boone's Creek Baptist Camp?

6. Anything else you feel we may need to know about this person _____

Your Name : _____

Address : _____

Phone Number : _____

Please mail or fax to :

Boone's Creek Baptist Camp

Post Office 537

Winchester, KY 40392

Fax: 859-744-1069