

APPLICATION FOR EMPLOYMENT
Timberline Baptist Camp & Conference Center, Inc.
15363 FM 849
Lindale, Texas 75771
(903) 882-3183
Fax: (903) 882-3184

Please respond to all questions and do not leave any response space blank. If you do not believe that a response is applicable, put "not applicable" in the blank. Use additional paper to respond if necessary.

PERSONAL

Name _____ Date _____
Last Maiden First Middle

Address _____

City _____ State _____ Zip Code _____

Business Phone _____ Home Phone _____

Driver's License # _____ State _____ Expiration Date _____

Social Security # _____ Date of Birth _____ Place of Birth _____

1. Position applying for: _____

2. On what date would you be available? _____

3. Minimum length of commitment: _____

4. Are you a member of a Smith Baptist Association affiliated church? Yes _____ Since _____ No _____

5. List cities and states in which you have lived; any denominations or churches of which you have been a member, including addresses; and all previous church service, volunteer or paid, you have provided since you were 17 years of age. Include approximate dates. (Attach a separate page, if necessary.)

City	State	Church	Address	Phone	Service

6. Do you have any friends or relatives presently or formerly employed by the Camp? Yes _____ No _____ If yes, please identify by name and relationship. _____

7. Have you previously applied for employment with or worked for Timberline Baptist Camp? Yes _____ No _____ If yes, please identify the date(s) of employment or application. _____

EMPLOYMENT HISTORY

List your present job first, or most recent job if you are now employed and then all others in reverse chronological order. LIST ALL FORMER EMPLOYMENT. Attach additional sheets if necessary.

EMPLOYER #1

Name _____

Address _____

Telephone _____ Your job title _____

Your last rate of pay _____ Your supervisor's name _____

Your date of hire _____ Your date of termination _____

Work performed _____

Reason for leaving _____

How many days did you work after giving notice of leaving? _____

Were you ever disciplined, warned or counseled about your job performance, attendance or any other work-related matter by this employer? Yes _____ No _____. If yes, please explain the circumstances. _____

May Timberline Baptist Camp contact your present employer? Yes _____ No _____. If not, who should be contacted for current employment verification? _____

EMPLOYER #2

Name _____

Address _____

Telephone _____ Your job title _____

Your last rate of pay _____ Your supervisor's name _____

Your date of hire _____ Your date of termination _____

Work performed _____

Reason for leaving _____

How many days did you work after giving notice of leaving? _____

Were you ever disciplined, warned or counseled about your job performance, attendance or any other work-related matter by this employer? Yes _____ No _____. If yes, please explain the circumstances. _____

Have you ever been discharged from any job: Yes _____ No _____. If yes, please identify the employer, date of discharge and explain the circumstances. _____

Please account for all periods of unemployment (of four weeks or more since you left high school) by noting the dates of unemployment and what you were doing during that time. _____

EDUCATION

High School

- 1. Name of School _____
- 2. City/State _____
- 3. Years Completed (Circle) 1 2 3 4 Did you Graduate? Yes No
- Year last attended _____

COLLEGE/UNIVERSITY/TECHNICAL OR VOCATIONAL

- 4. Name of School _____
- 5. City/State _____
- 6. Years Completed (Circle) 1 2 3 4 Did you Graduate? Yes No
- Year last attended _____
- 7. Course of Study and Degree, if any _____
- 8. Do you have any special skills, training, apprenticeship, or extra curricular activities that would apply to the job for which you are an applicant _____
- 9. Please describe below any additional education training or qualifications which you possess which you believe may assist the Camp in evaluating your application. _____
- 10. Do you consider yourself a positive role model? Yes _____ No _____
- 11. Please provide the names, and phone numbers of three personal references not related to you.

NAME	ADDRESS	HOME PHONE	WORK PHONE
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- a. _____
- b. _____
- c. _____

12. Because the Camp cares for our employees and campers and desires to protect them, we ask you to please answer the following questions. We understand the following questions are personal and we will protect your privacy.

a. Is there any reason, including those that are physical or mental health related, that might keep you from effectively working with children or that might cause a child potential harm? Yes _____ No _____

b. Have you ever been charged with, indicted for, or pled guilty to a crime? Yes _____ No _____
If yes, please explain: (attach a separate page, if necessary) _____

c. Have you ever been charged with, indicted for, or pled guilty to an action prohibited by the Texas Family Code, or a similar code in any state? Yes _____ No _____ . If yes, please explain: (attach a separate page, if necessary)

d. Have you ever been known by any other name? Yes _____ No _____ . If yes, please list all other names (including maiden name): _____

e. Would you be willing to be fingerprinted? Yes _____ No _____

If you were personally a victim of child abuse, we require that you make this information known to the Administrator. Admitting you were a victim will not automatically disqualify you from service. Your confidence will be respected and appreciated.

13. If you have a disability or impairment, describe or demonstrate how with or without reasonable accommodations you would be able to perform job-related functions. _____

14. Is there any health related reason that would keep you from effectively working with members or cause any potential harm to our members? Yes _____ No _____ If yes, please describe _____

You may choose to set an appointment with the Administrator and discuss the answer to this question personally rather than provide the information on this form. Your answer will be kept confidential.

The information contained in this application is correct to the best of my knowledge. I authorize Timberline Baptist Camp & Conference Center, Inc. to obtain information from references, employers and churches listed herein. I also authorize any references, churches or other organizations or employers listed in this application to give you any information, including opinions, that they may have regarding my character and fitness for the job I am applying. In consideration of the receipt and evaluation of this application by the Camp, I hereby release any individual, church, children's organization, charity, employer, reference, or any other person or organization, both collectively and individually, from any and all liability for damages of whatever kind or nature which may at any time result to me, my heirs, or family, on account of compliance or any attempts to comply, with this authorization. I waive any right that I may have to inspect any information provided about me by any person or organization identified by me in this application.

Should my application be accepted, I agree to be bound by the Bylaws and Policies of Timberline Baptist Camp & Conference Center, Inc. which are adopted from time to time, and to refrain from unscriptural conduct in the performance of my services on behalf of the Camp. I have been apprised of, understand and support the Camp's position on the problem of child abuse.

I understand that the Camp desires to protect its employees and campers and therefore give my permission for Camp leadership to conduct a criminal background check on me and to maintain my fingerprints and photo ID on file.

I further state that I have carefully read the foregoing release and now the contents thereof; and sign this release as my own free act. I understand that any misrepresentation or omission of a material fact on my application may be justification for refusal of employment.

In the event I am employed, I understand that all employees are subject to termination at the discretion of the Camp Administrator. If, in the event I choose to voluntarily terminate my employment, I am free to do so at any time, and if I choose to give proper notice of termination, the Camp may either permit me to continue my employment during the notice period or may accept my resignation immediately.

I understand that, in the event I am employed by the Camp, my compensation (if any), hours of service and all other terms and conditions of employment are subject to modification or change by the Camp at the Camp's discretion.

I understand that, if employed, any misrepresentation made by me completing this application shall be considered as sufficient cause for my dismissal without advance notice.

I authorize the Camp to supply my employment record, in whole or in part, and in confidence, to any prospective or future employer, governmental agency, or other party, with a legal and proper interest therein.

Applicant's Signature _____ Date _____

My email address is: _____

My T-Shirt size is: S M L XL XXL