

CAMP SONSHINE

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. . . *STEPPING UP*

Assistant Counselor Application (Returning ACs)

GENERAL INFORMATION (Please print clearly)

Date of Application First Name M.I. Last Name

Social Security Number D.O.B. Home Phone Cell Phone

Street Address

City State Zip Code Email Address

How many summers have you served at Camp Sonshine? _____ In What Positions? _____

What grade are you in? ('09- '10 school year) _____

Do you attend school in Maryland? Yes No School Name: _____

Do you regularly attend church? Yes No Church Name: _____

INTEREST INDICATOR (Please mark age groups/activities that interest you)

Pre – K (4 yrs old) Kindergarten (5 yrs old) Summer Office Activities/Electives
 Explorer 1 (1st grade) Explorer 2 (2nd grade) Ice Cream Shack Other: _____

Dates to Remember

March 29- April 2: Spring Break Camp
April 23: Send in Bus Request before this date
May 1: Tax Forms Due
May 8: Mandatory AC Training & Finger Prints
June 18: Mandatory Mock Camp Day

June 21 – July 2: Session One
July 5 – July 16th: Session Two
July 19 – July 30: Session Three
August 2 – August 13: Session Four
August 14- End of Summer Breakfast

BIOGRAPHICAL QUESTIONS (Please answer on a SEPARATE SHEET OF PAPER)

1. What was your favorite part about being an AC last summer?
2. What was the most challenging thing about serving at Camp Sonshine as an AC?
3. Name some things that you will do differently this year than you did last year.
4. What advice would you give to a brand-new AC?
5. Who is Jesus Christ to you personally?

LIFESTYLE

As an AC, you will be held responsible for your actions and words, during *and* after camp. What you say and do reflects the reputation of Camp Sonshine; therefore, it is important that you behave in a manner that is above reproach and criticism. Camp Sonshine is a place in which we facilitate a healthy and encouraging environment and discourage inappropriate discussion and behavior, especially around campers and other staff members. Please mark the box next to the word(s) that best describe **your** personal views and actions on the following subjects, in how **you** stand, not the way you feel towards others.

Verbally cutting down others: Acceptable Sometimes Never Wrong

Gossip: Acceptable Sometimes Never Wrong

Cursing: Acceptable Sometimes Never Wrong

Drinking alcohol: Acceptable Sometimes Never Wrong

Comments:

APPLICATION CONTRACT

By the signing of my name below, I affirm the following: 1) I have no conditions (physically or emotionally) that would limit my ability to perform the essentials of the camp routine; 2) I understand this is a Christian camp and my behavior must reflect the values of Camp Sonshine; 3) If accepted, I will enter into the spirit of Camp Sonshine and follow the guidelines set by the AC program; 4) I have completed this application truthfully.

Applicant's Signature

Date