

# 2010 Machon Application



Please mail completed application to:  
Tracy Bomberg  
Camp TEKO - Temple Israel  
2324 Emerson Ave S.  
Minneapolis, MN 55405  
612-374-0321 tbomberg@templeisrael.com



**Machon applicants must be entering grade 11.** Please contact the camp office for an Avodah (entering grades 9 & 10) or a Staff (entering grade 12 and above) application.

## GENERAL INFORMATION

First and Last Name: \_\_\_\_\_ Date: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Address: \_\_\_\_\_  
Street City State Zip

Cell Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_ T-shirt Size:  S  M  L  XL

Synagogue: \_\_\_\_\_ Gender: \_\_\_\_\_ Age: \_\_\_\_\_ Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_

Parent/Guardian (P/G) Name: \_\_\_\_\_

P/G Home Phone: \_\_\_\_\_ P/G Work Phone: \_\_\_\_\_ P/G Cell Phone: \_\_\_\_\_

Parent/Guardian (P/G) Name: \_\_\_\_\_

P/G Home Phone: \_\_\_\_\_ P/G Work Phone: \_\_\_\_\_ P/G Cell Phone: \_\_\_\_\_

How did you hear about Camp TEKO (if from a friend, whom)? \_\_\_\_\_

Can you work at Camp TEKO from June 21- August 13?  Yes  No If no, please explain (wedding, Bar Mitzvah, etc.):

Are you able to host an Israeli staff member for part of the summer?  Yes  No Available dates: \_\_\_\_\_

Circle **all** bus stop preferences: Temple Israel (Mpls) Breck School (Golden Valley) Beth El (SLP) Adath (Mtka)

Burroughs Elem. (Mpls) Creek Valley Elem. (Edina) Zachary Lane Elem. (Plym) Groveland Elem. (Mtka)

Greenwood Elem. (Plym)

With what age group(s) do you prefer working?  Pre-K/Kind.  Grades 1-2  Grades 3-4  Grades 5-6

Why? \_\_\_\_\_

Do you have experience working with children with special needs?  Yes  No If yes, please explain:

\_\_\_\_\_

## EDUCATION

High School: \_\_\_\_\_ Date of Graduation: \_\_\_\_\_

Extracurricular Activities: \_\_\_\_\_

Religious School: \_\_\_\_\_ Israel Programs: \_\_\_\_\_

## CERTIFICATIONS AND SKILLS

### CERTIFICATIONS

Indicate the organization through which you were certified and enclose a copy of all certifications.

- CPR \_\_\_\_\_ exp. \_\_\_\_\_
- First Aid \_\_\_\_\_ exp. \_\_\_\_\_
- Lifeguard \_\_\_\_\_ exp. \_\_\_\_\_
- WSI \_\_\_\_\_ exp. \_\_\_\_\_
- Pool Operator \_\_\_\_\_ exp. \_\_\_\_\_
- EMT \_\_\_\_\_ exp. \_\_\_\_\_
- Other \_\_\_\_\_ exp. \_\_\_\_\_

### SKILLS

Check items in which you have some skill. Double check those you are proficient in and can teach or lead.

#### WATERFRONT

- Swimming
- Boating
- Water rescue
- Lifeguarding

#### RELIGIOUS/SPIRITUAL

- Meditation
- Yoga
- Prayer
- Hebrew language
- Torah study

#### SPORTS

- Basketball
- Gaga
- Soccer
- Softball
- Ultimate frisbee
- Volleyball
- Other: \_\_\_\_\_

#### ARTS AND CRAFTS

- Candles
- Tie-dye
- Ceramics
- Photography
- Painting
- Papermaking
- Judaic art

#### WILDERNESS

- Hiking
- Backpacking
- Rock climbing
- Ropes course
- Environmental education
- Nature crafts
- Gardening

#### MUSIC

- Guitar
- Song leading
- Piano
- Sound equipment

#### DANCE & DRAMA

- Drama games
- Theatre production
- Playwriting
- Storytelling
- Israeli dancing
- Hip hop dance
- Swing dance

#### OTHER SKILLS

- Cooking
- Sign language
- Conflict resolution

Describe your hobbies, special interests, and any other skills not listed:

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List courses you have completed relating to children, leadership, outdoor skills, or social service:

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**CAMP**

Camps attended as a camper (names and years): \_\_\_\_\_

Were you in the Avodah program at Camp TEKO last summer?    Yes    No

In the future, for which position(s) would you be interested in applying (circle all that apply): day camp counselor  
overnight camp counselor   specialist (art   drama   nature   music   sports   swimming   boating   photo/video)   advocate

**EMPLOYMENT/VOLUNTEER HISTORY**

**CHILDCARE EXPERIENCE:**

Include other summer camp work. Please begin with most recent employer and include phone numbers, as we may call for references. Note that if the information below is not complete, it may delay or prevent the processing of your application.

<u>Position</u>	<u>Organization and/or Supervisor Name</u>	<u>Dates</u>	<u>Phone Number</u>
1. _____			

Brief Description of Duties: \_\_\_\_\_

Age of Kids:    Pre-K/Kind.    Grades 1-2    Grades 3-4    Grades 5-6   Reason for Leaving: \_\_\_\_\_

<u>Position</u>	<u>Organization and/or Supervisor Name</u>	<u>Dates</u>	<u>Phone Number</u>
2. _____			

Brief Description of Duties: \_\_\_\_\_

Age of Kids:    Pre-K/Kind.    Grades 1-2    Grades 3-4    Grades 5-6   Reason for Leaving: \_\_\_\_\_

**OTHER EMPLOYMENT/VOLUNTEER EXPERIENCE:**

<u>Position</u>	<u>Organization and/or Supervisor Name</u>	<u>Dates</u>	<u>Phone Number</u>
1. _____			

Brief Description of Duties: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

<u>Position</u>	<u>Organization and/or Supervisor Name</u>	<u>Dates</u>	<u>Phone Number</u>
2. _____			

Brief Description of Duties: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

**REFERENCES**

Please use employers, coaches or teachers. *Do not use family members, family friends or personal friends.*

<u>Name</u>	<u>Relationship</u>	<u>Years of Acquaintance</u>	<u>Phone Number</u>	<u>E-mail</u>
1. _____				
2. _____				
3. _____				

**\*\* Attached to this application are 2 reference forms for you to send to your references. All references must be returned by the reference directly to the TEKO office by mail or fax (612-377-6630).**

**ADDITIONAL INFORMATION**

**Please answer the following using the space below or a separate typed sheet.**

What do you think are the goals of Camp TEKO? \_\_\_\_\_

Why do you want to be in the Machon program? \_\_\_\_\_

What do you think you can contribute to the Machon program? \_\_\_\_\_

What do you want to gain from the Machon program? \_\_\_\_\_

Describe your most rewarding experience working with a child: \_\_\_\_\_

Describe the most difficult situation you've experienced while working with a child. How did you handle it?

Describe your greatest strengths: \_\_\_\_\_

Describe your greatest weaknesses: \_\_\_\_\_

**APPLICANT AGREEMENT**

I hereby certify that the facts set forth in this application are true and complete to the best of my knowledge. I understand that if I am employed, false or misleading statements given on my application or during my interview may result in my dismissal.

Applicant Signature \_\_\_\_\_ Date \_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_