

# 2010 Returning Staff 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



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

## GENERAL INFORMATION

First and Last Name: \_\_\_\_\_ Date: \_\_\_\_\_ Entering Grade (Fall 2010): \_\_\_\_\_

Position(s) Desired: 1) \_\_\_\_\_ 2) \_\_\_\_\_ 3) \_\_\_\_\_

College/Current Address: \_\_\_\_\_ Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ College/Current Phone: \_\_\_\_\_

Permanent Address: \_\_\_\_\_ Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Perm. Phone: \_\_\_\_\_

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

Synagogue: \_\_\_\_\_ Gender: \_\_\_\_\_ Age: \_\_\_\_\_ Date of Birth\*: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
\*Not used as a basis for employment.

Emergency Contact (EC) Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

EC Home Phone: \_\_\_\_\_ EC Work Phone: \_\_\_\_\_ EC Cell Phone: \_\_\_\_\_

Can you work at Camp TEKO from June 15 – August 15?  Yes  No If no, please explain (wedding, college orientation, etc.): \_\_\_\_\_

Would you be interested in working Specialty Camp from August 16-20? \_\_\_\_\_

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) Are you interested in being a paid bus captain?  Yes  No

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: \_\_\_\_\_

College: \_\_\_\_\_ Date of Graduation: \_\_\_\_\_ Major: \_\_\_\_\_

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

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

Additional Education (grad school, study abroad, etc.): \_\_\_\_\_

## 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
- Fishing

#### DANCE & DRAMA

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

#### MUSIC

- Guitar
- Song leading
- Piano
- Sound equipment

#### SPORTS

- Basketball
- Gaga
- Soccer
- Softball
- Ultimate Frisbee
- Volleyball
- Archery
- Floor hockey
- Other: \_\_\_\_\_

#### ARTS AND CRAFTS

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

#### RELIGIOUS/SPIRITUAL

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

#### WILDERNESS

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

#### OTHER SKILLS

- Cooking
- Sign language
- Conflict resolution

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

---

---

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

---

---

## ADDITIONAL INFORMATION

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

During your last summer at camp, what was your strongest contribution as a staff member?

---

---

In what area(s) do you need to develop your skills in order to be a better staff member?

---

---

Why are you qualified for the position(s) for which you are applying?

---

---

What is the most important life lesson you have learned recently?

---

---

---

**EMPLOYMENT HISTORY**

**CAMP TEK0:**

Avodah: \_\_\_\_\_ Year      Machon: \_\_\_\_\_ Year      Staff: \_\_\_\_\_ Year(s) and Position(s)

**PLEASE LIST WORK EXPERIENCE AFTER YOUR LAST SUMMER AT TEK0.**

**CHILDCARE EXPERIENCE:**

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: \_\_\_\_\_

**OTHER EMPLOYMENT 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: \_\_\_\_\_

**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. _____	_____	_____	_____	_____

\*\* Returning staff (from 2008) must have at least two current references on file. To submit additional references, please use the attached forms. All references must be sent by the applicant and returned by the reference directly to the TEK0 office by mail or fax (612-377-6630).

**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 \_\_\_\_\_  
If applicant is under 18 years of age, a parent/guardian must sign as well.

Date \_\_\_\_\_

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

Date \_\_\_\_\_