



2012 Machon Application

Please mail completed application to:

Andrea Gordon
Camp TEKO - Temple Israel
2324 Emerson Ave S.
Minneapolis, MN 55405
612-374-0321 agordon@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)? _____

To participate in the Avodah program, you must be able to work at camp for a total of at least two weeks over the course of the summer.

Can you work at Camp TEKO from June 18- August 12? ___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: _____

CERTIFICATION 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:

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

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 advocate Specialist (art drama nature music sports swimming boating photo/video)

EMPLOYMENT/VOLUNTEER HISTORY

CHILDCARE EXPERIENCE:

Do you have any previous experience working with children? ___ Yes ___ No

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

Brief Description of Duties: _____

Reason for Leaving: _____

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: _____

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).

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 _____