



CAMP TAKAJO *Naples, Maine 04055 (207) 693-6675 FAX: (207) 693-6654*

Winter Address: 34 Maple Avenue Armonk, New York 10504 (914) 273-5020 FAX: (914) 273-5352

COUNSELOR APPLICATION

MAIL TO: 118 JULIAN PLACE, SUITE 211, SYRACUSE, NY 13210

Please complete in detail, typed or handwritten neatly.
Use additional sheets, if necessary. Use N/A (Not Applicable) when appropriate.
Thank you for your interest in Camp Takajo.

JEFFREY A. KONIGSBERG, Director
WARREN A. DAVIS, Associate Director
ROBERT L. LEWIS, Staffing Director

NAME

HOME address SCHOOL address

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HOME phone SCHOOL/WORK phone

CELL phone EMAIL address.....

PRESENT OCCUPATION or YEAR IN SCHOOL

NAME OF COLLEGE OR UNIVERSITY.....

DATE OF GRADUATION.....

CURRENT MAJOR or DEGREE(S) ATTAINED

EXTRACURRICULAR ACTIVITIES and INTERESTS (varsity, intramural, club, cultural, volunteer, other)

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CAREER OBJECTIVE(S)

FAMILY ACCOMODATIONS REQUIRED? IF YES, EXPLAIN

BIRTHPLACE CITIZEN OF

BEST TIME(S) TO REACH YOU BY TELEPHONE

SCHOOL VACATION DATES: Spring

Summer

IF FORMER CAMPER, NUMBER OF YEARS WHERE?

HOW DID YOU LEARN OF CAMP TAKAJO?

AGE GROUP:

Please indicate first choice for age group of boys with whom you would feel most comfortable living in a bunk.
If you have a second choice, indicate also.

-CROWS [ages 7 & 8]
-WARRIORS [ages 9 & 10]
-JUNIORS [ages 11 & 12]
-SENIORS [ages 13 to 15]
-No Preference

ACTIVITY:

Activities listed below in CAPITAL LETTERS indicate programs offered by the camp for which specific positions are available.
Put a "1" next to each activity you are qualified to head. Put a "2" next to each activity in which you can be an effective assistant.
PLEASE BE SELECTIVE!

- BASEBALL
- BASKETBALL
- LACROSSE
- SOCCER
- TENNIS
- PADDLE TENNIS
- ROLLER HOCKEY
- GOLF
- FLAG FOOTBALL
- WEIGHT TRAINING
- GENERAL
(with youngest campers)
- SWIMMING
- SAILING
- WATERSKIING
- CANOEING
- ARCHERY
- CAMP NEWSPAPER
- PHOTOGRAPHY
- RADIO & ELECTRONICS
- WOODWORKING
- VIDEO
- NATURE STUDY
- PIONEERING & TRIPPING
(rock climbing, hiking, camping, whitewater canoeing)
- DRAMATICS
- PIANIST (to teach classes and accompany shows)
- MUSIC INSTRUMENTALIST
- CERAMICS
- CRAFTS
- DRAWING & PAINTING
- SECRETARIAL

SECONDARY ACTIVITIES:

Activities listed below are camp related, but we do not have specific programs in these areas. Put number "1" next to those activities in which you have considerable experience and are qualified to teach. Put number "2" next to those in which you have some experience.

- Softball
- Track & Field
- Football
- Volleyball
- Wrestling
- Competitive Swimming
- Diving
- Fishing
- Kayaking
- Water Polo
- Computer
- Gymnastics
- Indian Lore
- Rocketry
- Leather Crafts
- Metal Work
- Sculpture
- Silk Screening
- Papier Mache
- Story Telling
- Song Leading
- Bicycling
- Mountaineering
- Map Reading
- Ropes Course Instructor
- Animal Care
- Plants, Trees, Wildflowers
- Stage Craft, Scenery, Lighting
- Costuming, Makeup
- Arranging Music
- Band Leader

Do you currently have, or have you ever had, AMERICAN RED CROSS or YMCA/YWCA INSTRUCTOR CERTIFICATES in any of the following areas? (If so, indicate expiration date.)

- CPR FIRST AID LIFEGUARD TRAINING
- WSI SAILING CANOEING

SWIMMING ABILITY: Strong Average Weak

ABILITY TO HANDLE WATERCRAFT: Strong Average Weak

Do you have any other AQUATICS or SMALL CRAFTS training? If so, explain.
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MILITARY EXPERIENCE:

MUSICAL BACKGROUND: Do you play an instrument? If so, what?

Do you read music? Will you bring an instrument to camp?

Will you participate in camp band if an instrument is available?

Other than English, do you speak any other language(s) fluently?

DO YOU POSSESS: Valid Driver's License..... School Bus Driver's License.....

WORK EXPERIENCE / REFERENCES

LIST THREE REFERENCES below who know you well and who have observed you working with children or in people oriented situations. Describe your relationship with each. If your previous work experience is limited, include as references persons who know you well from school, Boy Scouts, or other youth organizations. USE ADDITIONAL SHEETS, IF NECESSARY.

	1.	2.	3.
NAME
TITLE
ORGANIZATION
ADDRESS
CITY, STATE, ZIP
HOME PHONE
WORK PHONE
YEARS KNOWN
RELATIONSHIP
JOB DESCRIPTION

OTHER INFORMATION

ACTIVITY / SPECIALTY

Primary Interest: In which activity program would you most like to lead or assist? Describe your training and/or leadership experience in this area. Also indicate why you would like to work with a particular age group.

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Secondary Interests: In which other camp activities are you especially interested? Describe your training and/or leadership experience in these areas. Also indicate any skills or talents not previously mentioned that could contribute to the camp experience.

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Why do you want to be a camp counselor? What qualities and characteristics do you possess which will enable you to effectively fulfill your responsibilities and to successfully meet the demands you will encounter as a cabin and activity counselor? Please use this opportunity to include anything else you feel is relevant to our consideration of your application.

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Any special considerations, conditions, or problems concerning your accepting employment at camp? Also use this space for any questions you may wish to ask at this time.

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**2008 CAMP DATES, including preseason orientation, are June 20 through August 15.
PIONEERING STAFF arrive June 12, 2008 - WATERFRONT STAFF arrive June 13, 2008 - TENNIS STAFF arrive June 16, 2008.**

Are you available for this entire period? If not, explain

Approximate eight-week salary desired:

Have you ever worked at another camp? If so, list each camp, dates you worked there, contact person, and phone number.....

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Do you have any visible tattoos or body piercings? ? If yes, explain.....

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Have you ever been arrested? If yes, explain.....

Have you ever been charged with DUI (Driving Under the Influence of alcohol)? If yes, explain.....

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Have you ever been charged with any crime related to sexual abuse or child abuse? If yes, explain.....

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I hereby state that the information contained herein is truthful and accurate. I understand it is to be considered an integral part of any contract I may enter for employment at Camp Takajo. I further understand that the camp will conduct a thorough background check to obtain information pertinent to my being hired.

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(Signature of Applicant) (Date Submitted)

Date of Birth-.....-.....

Social Security #

Driver's License # State

Camp Takajo is an equal opportunity employer. This information will be held in strict confidence. If we are not able to offer you a position, may we refer your application to other camps?