



2018 YOUTH CAMP

intern application

QUALIFICATIONS: We are looking for mature, Spirit-filled Christians who have a genuine love for students. A camp staff member must have the ability to work in harmony with those whose views may be different from yours. Applicants must be High School graduates. The camp internship program is not a place for students who need help to be a better Christian, but instead should be a reward for those who live a consistent Christian life and are good examples for students.

SELECTION: Space is limited and is given on a first come, first served basis.

- PROCEDURE:**
1. Write a one-page essay on why you want to be a summer intern. *(first-time interns only)*
 2. Attach a picture of yourself to the application. *(first-time interns only)*
 3. Send this application, essay & picture to:
PFYouth, PO Box 24687 Lakeland, FL 33802-4687

**In order to serve you better we MUST have your completed application by May 1st.
APPLICATIONS WILL BE RETURNED IF ANY AREAS ARE LEFT BLANK!**

Name: _____ Birthdate: ___ / ___ / ___ Age: ___ Gender: M F Marital Status: M S
Mailing Address: _____ City: _____ State: ___ Zip: _____
Home Phone: (____) _____ Cell Phone: (____) _____ T-shirt Size: S M L XL 2X
Email Address: _____
Emergency Contact Name: _____ Emergency Contact Phone: (____) _____
Name of Church: _____ City: _____ Pastor's Name: _____
Are you a Christian? Yes when? _____ No
Baptized in the Holy Spirit? Yes when? _____ No
Do you use tobacco? Yes No Drink alcoholic beverages? Yes No Use non-prescription drugs? Yes No
Do you have any physical handicap or condition preventing you from performing certain types of activities? Yes No
If yes, please explain: _____
Interested in: Youth Camp 1: June 18-22 Youth Camp 2: June 25-29
Check all that apply Youth Camp 3: July 2-6 Youth Camp 4: July 9-13

**List two personal references (excluding pastor/youth pastor and family members)
These MUST be filled out completely or your application WILL BE RETURNED**

Name: _____ How long have you known this individual? _____
Address: _____ City: _____ State: ___ Zip: _____ Phone: (____) _____
Name: _____ How long have you known this individual? _____
Address: _____ City: _____ State: ___ Zip: _____ Phone: (____) _____
Previous Masterpiece Gardens camp staff experience: Years _____ Positions Held _____
I have previously served as a PFYouth Camp Intern: Yes No Years _____
Do you have any medical training? (i.e. RN, LPN, EMT, First Aid Certification) Yes No
If Yes, please explain: _____

(continued on back)

APPLICANT STATEMENT

Are you willing to abide by the camp rules, be given any position or assignment, be placed in any dorm, and if need be, go beyond the duties of your assigned position? YES NO

The information I have provided in this application is correct to the best of my knowledge. I have carefully read all the information provided in the application form. I authorize any references or churches listed in this application to give you any information they may have regarding my character and fitness for Youth Camp, and I release all such references from liability for any damage that may result from furnishing such evaluations to you.

Should my application be accepted, I agree to be bound by the policies of Camp, and refrain from unscriptural conduct or conduct the camp leadership may feel inappropriate, in the performance of my service. I will fully cooperate in spirit.

I understand that I am required to have a **DCF Live Scan Report** on file with Masterpiece Gardens Campground **PRIOR** to my arriving at the campground, or I will be asked to vacate the property. I understand that my acceptance as a camp intern is contingent upon the results.

I also grant my permission to the Peninsular Florida District Council of the Assemblies of God to use photographs (individual or group) and/or multimedia images and recording in the best interest of the Peninsular Florida District Council.

APPLICANT'S SIGNATURE _____ DATE _____



internship specifics

YOUTH

- Complete LIVE SCAN Level 2 Background Check and have on file with Masterpiece Gardens prior to June 1st
- Interns chosen each summer will be notified in May of acceptance. Space is limited.
- Arrive each week at Masterpiece Gardens on Sunday at 4pm
- Depart each week from Masterpiece Gardens on Friday at 4pm
- Must have a heart to WORK and SERVE
 - Long Hours
 - No Titles or Authority
- Physically, Mentally & Spiritually Demanding
- Food and Lodging are Provided
- Experience every aspect of the camp experience
- Experience personal mentoring time with the District Youth Director and each of the Camp Speakers
- Interns can be dismissed at any time based on camp registration numbers or the intern's lack in effort or commitment.

PASTOR'S RECOMMENDATION

for youth camp intern

Please give this application to your pastor.
They will complete the remaining section and send it to
Pen Florida Youth Ministries, PO Box 24687, Lakeland FL 33802-4687

Applicant: _____

Pastor, do you feel this applicant will be a/an: Excellent Good Fair Poor Staff Member?
Comment: _____

Do you recommend them without reservation? Yes No
If no, please state why: _____

How long have you known this individual? _____

Would you consider this person to be a positive influence? Yes No
If no, please state why: _____

PLEASE CHECK AND COMPLETE THE AREAS THAT APPLY TO YOU:

Credentialed Minister: Credentials & District: _____

Full-time Youth Pastor: Church _____

Part-time Youth Pastor: Church _____

Pastor's Signature _____

Date _____

