

Special Camps for Special Kids Camp John Marc Summer Volunteer Information

Camp John Marc serves children with chronic illnesses and major physical disabilities, and the families of those children, by making possible high-quality, year-round camping experiences at its unique camping facility in Bosque County. Each summer week more than 100 campers, ages 7-18 come to Camp John Marc to experience traditional camp activities, learn new skills, and enjoy friendships with other campers.

The Camp John Marc program relies heavily on the support of volunteers who serve in the role of cabin counselor. Each cabin of 7 campers is led by a team of 3 volunteer counselors. The volunteer counselors are responsible for the daily care and supervision of the campers and participate in daily camp activities with the campers. If you are interested in serving as a volunteer counselor for an entire week at camp, please complete and return the Summer Volunteer Application.

Volunteer Counselor Requirements

- Complete and return Summer Volunteer Application
- Consent to a criminal background check (complete VERIFYI form attached)
- Interview with Camp Directors
- Agree and commit to our Code of Ethics
- Participate in all training sessions

Please indicate which week(s) you are available to volunteer.

Our greatest need for volunteers in 2007: June 9-15, July 7-13, & August 4-10

_____ May 26-June 1	Camp Reynal for Campers who have Kidney Disease
_____ June 2-8	Camp I-Thonka-Chi for Campers who are Burn Survivors
_____ June 9-15	Camp TLC for Campers who have Spina Bifida
_____ June 16-21	MDA Camp for Campers who have Muscular Dystrophy
_____ June 23-29	Camp Moss for Campers who have Heart Disease
_____ June 30-July 6	Camp Sanguinity for Campers who have Cancer
_____ July 7-13	Camp Jubilee for Campers who have Sickle Cell Anemia
_____ July 14-20	Camp Ailihpomeh for Campers who have Hemophilia
_____ July 21-27	Camp Esperanza, for Campers who have Cancer
_____ July 28-August 3	Camp Joint Adventure for Campers who have Juvenile Arthritis
_____ August 4-10	Camp Broncho for Campers who have Severe Asthma



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Special Camps for Special Kids Camp John Marc Summer Volunteer Application

(For those who have never volunteered at Camp John Marc)

Instructions: Please print clearly and sign this form where indicated. Please answer all questions, clearly indicating not applicable in response to questions where that response is appropriate.

Name _____
First Middle Last

Date of Application _____ Date of Birth _____

Race _____ Sex: Male / Female Social Security # _____

Maiden or Other Former Legal Names (if any) _____ T-Shirt Size _____

Marital Status _____ Spouse's Name _____

Address(es) (now & after June 1) _____

Three Previous Addresses _____

Driver's License # _____ State _____ Classification _____

Email Address(s) _____

Phone Number(s) _____

Emergency Contacts (Name & Phone) _____

Person Who Referred You or How You Heard of Us _____

Education (High School & Post-High School) _____ (School)

_____ (Degree) _____ (Field of Study)

Occupation (or School Attending) _____

Current Employer _____ City _____

Current Supervisor _____ Phone _____

Employment Dates _____

Previous Employer _____ City _____

Previous Supervisor _____ Phone _____

Employment Dates _____

Have you ever been fired or terminated for cause from any job, or have you ever been suspended or required to withdraw from a school? _____ If so, please explain _____

Have you ever been accused of, charged with, or convicted for any crime, including child molestation or any crime endangering a child? _____ If so, please explain _____

Have you ever been charged with DWI or DUI or other motor vehicle offense? _____ If so, please explain, incl. year, charge, county, state _____

Has your driver's license ever been revoked or suspended? (If yes, please explain) _____

Volunteer Experience _____

Previous Camping Experience (Personal or as Counselor) _____

Child Care Experience/Training _____

Experience with Special Needs Children _____

Please describe your goals and expectations as a volunteer _____

References: (THREE Required, NOT relatives or peers)

Name _____ Email Addr. _____

Address _____

Phone Number(s) _____ Relationship to You _____

Name _____ Email Addr. _____

Address _____

Phone Number(s) _____ Relationship to You _____

Name _____ Email Addr. _____

Address _____

Phone Number(s) _____ Relationship to You _____

Your Special Skills/Training (circle yours):

First Aid CPR Life Saving Sign Lang. Sports Singing Drama

Musical Instrument _____ Other _____

For Your Health & Safety please circle your Physical Conditions:

Hay Fever Eczema Asthma Allergies Heart Disease/Defect Diabetes

Other _____

Medications you currently take _____

Medication allergies _____

Other Restrictions/Limitations _____

Doctor's Name: _____ Phone # _____

Do you feel you can safely lift 50 pounds? _____

Do you currently use an illegal drug? _____

You must sign the VeriFYI form, consenting to a background check. *(Please be advised that although the release indicates that VeriFYI may access credit information, we do not ask for nor receive this type of information. Your credit history is not a criteria for selection as a volunteer. VeriFYI uses this info to confirm social security numbers and to track prior states of residence)*

You must read and sign the Code of Ethics.

Camp John Marc

CODE OF ETHICS

1. Staff/Volunteers understand and embrace the mission of the Camp and of Camp John Marc and willingly and knowingly accept the concept that the focus and goals of the Camp are directed to the campers.
2. Staff/Volunteers will never leave a camper unsupervised.
3. Staff/Volunteers will never be alone with campers or a camper, except when assisting with personal hygiene or toileting which is permitted by specific Camp policies or in an emergency.
4. Staff/Volunteers will not abuse campers including:
 - Physical Abuse strike, spank, shake, slap
 - Verbal Abuse humiliate, degrade, threaten
 - Sexual Abuse including inappropriate touching
 - Mental Abuse hazing, negative manipulation
5. Staff/Volunteers will use positive guidance techniques including redirection, anticipation of and elimination of potential problems, positive reinforcement, support and encouragement rather than competition, comparison, criticism, or humiliating discipline techniques.
6. Staff members must treat with confidence and respect personal information they learned from campers, subject to the policies on reporting abuse and neglect, as referenced elsewhere in this Manual.
7. Staff/Volunteers will treat all campers of all ethnic, religious and cultural backgrounds with respect and consideration.
8. Staff/Volunteers will portray a positive role model for campers, including but not limited to, maintaining an attitude of respect, loyalty, patience, honesty, courtesy, tact and maturity.
9. Staff/Volunteers will not use profanity or discuss adult subject matter in the presence of campers.
10. Staff/Volunteers will adhere to the dress code for Camp. (See Reference Material.)
11. Staff/Volunteers will not use, possess or be under the influence of alcohol or illegal drugs during Camp or while on Camp property.
12. Staff/Volunteers are prohibited from having firearms or other weapons while at Camp.
13. Staff/Volunteers must be free of health or psychological conditions that might affect campers' health.
14. Staff/Volunteers will comply with the outlined activities and expectations of their defined roles at Camp and all required activities prior to Camp which support their roles.
15. Staff/Volunteers are prepared and willing to assist and support campers to meet personal daily needs.
16. Staff/Volunteers will accommodate and be sensitive to the developmental differences and abilities of individual campers.

17. Staff/Volunteers who do not have a pre-existing relationship with a camper will not fraternize with campers (baby sitting, phone calls, private lessons) outside of Camp supervised activities or the Camp setting. Any exception to this policy requires written approval in advance from the sponsoring organization's Camp Volunteer coordinator or Camp Director.
18. Staff/Volunteers will not offer gifts or money to campers or their families.
19. Staff/Volunteers are requires by Texas State laws to report any suspected abuse or neglect of a child to the Camp Director so that it may be reported to the authorities (Texas Department of Protective and Regulatory Services and local enforcement agency).(See Reference Material)
20. Staff/Volunteers will not make personal disclosures to campers with an attempt to influence individual beliefs, values or lifestyles.
21. Staff/Volunteers will adhere to the outlined policies, procedures and standards of Camp John Marc.
22. Staff/Volunteers must agree to provide all criminal and other background check information requested of them and must meet qualification standards established by the Camp.

Staff/Volunteers must comply with this Code of Ethics throughout placement with the Camp and affiliation with the sponsoring organization. Compliance with the Code of Ethics is a condition of continued involvement with the Camp. I understand that violation of the following standards will be regarded as engaging in unethical behavior, which is grounds for immediate termination of roles and responsibilities, as well as future involvement with Camp.

Signature _____ Date _____



Background Verification Release Form

AGENCY INFORMATION

Date	Agency Name
Contact Name	
Agency's Main Phone Number	Agency's Fax Number

APPLICANT INFORMATION:

Applicant Full Name (Last, First, MI)		Maiden or Other Name(s) Used	
Current Address	City	State	Zip Code
If Different, Address Prior 5 Years-City, State			
Social Security Number	Date of Birth	Driver's License Number	State Issued
Position Applied For			
Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female	Race	<input type="checkbox"/> African American <input type="checkbox"/> American Indian <input type="checkbox"/> Anglo <input type="checkbox"/> Asian <input type="checkbox"/> Hispanic <input type="checkbox"/> Other

I hereby authorize VERIFIYI and or its Service Provider to request and receive any and all background information about or concerning me, including but not limited to my Criminal History, Social Security Number Trace including a consumer report under the Fair Credit Reporting Act, 15 U.S.C 1681, Driving Record, Employment History, Military Background, Civil Listings, Educational Background, Professional License from any Individual, Corporation, Partnership, Law Enforcement Agency, and other entities including my Present and Past Employers.

The criminal history, as received from the reporting agencies, may include arrest and conviction data as well as plea bargains and deferred adjudications and delinquent conduct as committed as a juvenile. I understand that this information will be used, in part, to determine my eligibility for an employment/volunteer position with this organization. I also understand that as long as I remain an employee or volunteer here, the criminal history check may be repeated at any time. I understand that I will have an opportunity to review the criminal history as received by client/agency and a procedure is available for clarification, if I dispute the record as received. I also understand that the criminal history could contain information presumed to be expunged.

I further release and discharge VERIFIYI and their Service Provider and all of their Subsidiaries, Affiliates, Officers, Employees, Contract Personnel, or Associates, from any and all claims and liability arising out of any request for information or records pursuant to this authorization, procurement of an investigative consumer report and understand that it may contain information about my character, general reputation, personal characteristics, and mode of living, whichever are applicable.

I understand that I have the right to make written request within a reasonable period of time to VeriFYI for additional information concerning the nature and scope of the investigation. I acknowledge that I have voluntarily provided the above information for employment/volunteer purposes, and I have carefully read and understand this authorization.

Applicant's Signature

Date

Applicant's Printed Name

Parent/Guardian's Signature
(if under 18 years of age)