



CAMP TO BELONG MAINE

Giving Siblings in Maine Their Right to Reunite



PLEASE READ THE FOLLOWING IN ITS ENTIRETY

Dear Volunteer Applicant:

Thank you for your interest in becoming a Camp To Belong Maine (CTBM) volunteer camp counselor. We are looking forward to our eighth camp week this August 2011 which is being held again at the magical Camp Wigwam in Waterford, Maine. After two full days of staff training (August 13-15), we will welcome on August 16 approximately 50 brothers and sisters from around the state of Maine who have been separated in the foster care system or other out-of-home care. This camp week is an opportunity for siblings to spend time together in a relaxed, yet exciting, environment where they can swim, ride on the water tube, wall-climb, canoe/kayak, make scrapbooks, and celebrate during a birthday party. These are just a few of the activities/events that take place during camp.

It will be the responsibility of the volunteer camp counselors to provide a safe, nurturing, and fun setting for these siblings to connect with one another and with other campers who are in similar situations and to safely enjoy their week at camp. We look for camp counselors who

are responsible & respectful,
are energetic & like to have fun
are team players and can take initiative
are willing to jump in the trenches,
are willing to be totally unselfish,

feel exhilaration,
yearn to learn and understand the needs of the resilient kids
who will be campers
and who also understand and value the sibling relationship.

New Applicants (never been to CTB Maine before)

If you have never been a counselor at Camp To Belong Maine, please complete the attached "Volunteer Counselor Application" and distribute the "Camp To Belong Volunteer Reference Questions" section to your three references. All sections of the application should be completed EXCEPT the sections marked "For Veteran Counselors Only." All completed forms need to be returned to me at the address at the end of the application/renewal form. The reference form can also be emailed to me at heidi@camptobelong.org. Because of the confidential information contained on the application/renewal form, **I do not recommend sending the application electronically.**

Once we have received your application, you will be contacted to schedule an interview. In most cases a telephone interview will be scheduled. A follow-up interview may also be requested if we have further questions. A decision will not be made until all three reference letters are received and background checks have been returned.

Veteran Camp To Belong Maine Counselors

If you are a returning CTB Maine veteran counselor, please complete all sections of the Application/Renewal Form EXCEPT the sections marked "For New Applicants Only" and return the completed form to me at the address at the end of the application/renewal form. Background checks will be run on **all counselors**, including veteran counselors. If the background check is returned with any concerns, you will be contacted for further discussion.

Again, on behalf of the Camp To Belong Maine Planning Committee, I thank you for your interest in volunteering at CTBM. If you have any questions, please do not hesitate to contact me at 207-899-7507 or at heidi@camptobelong.org.

Heidi M. Krieger, Director

PO Box 8077, Portland, ME 04104 * 207-899-7507 * heidi@camptobelong.org * www.camptobelongmaine.org

Camp To Belong Maine is a project of Adoptive and Foster Families of Maine, Inc. and is a non-profit 501c3 organization (01-0515363)

Camp To Belong Maine is a member of the Camp To Belong International Association of Camps

VOLUNTEER COUNSELOR APPLICATION/RENEWAL FORM

CAMP TO BELONG MAINE CAMP WIGWAM, WATERFORD, MAINE AUGUST 16-21

(COUNSELORS ARRIVE 8/13 (5 P.M.), TRAINING 8/13 - 8/15, CAMPERS 8/16-8/21)

Please consider your application and commitment to become a volunteer counselor carefully. We understand that some life events can occur unexpectedly. However, we must stress the importance the role our volunteer counselors play. We maintain a 2:1 ratio of campers to counselors so we accept campers based on the number of counselors who have committed. If counselors drop out, especially close to the dates of camp, the number of campers is adversely impacted.

By completing and returning this form and proceeding through the interview and screening process (interviews for new applicants only), you are indicating that you have made all the necessary arrangements (work, home, school, etc) to be at Camp the entire week pending a successful outcome of the interview and background check.

Please complete the following information. Note that certain sections (designated by shaded blocks) need to be completed only by those indicated at the top of each block. Any areas not in a block must be completed by all applicants

DATE OF APPLICATION: _____

NAME: _____

AKA: _____ SOCIAL SECURITY # _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

HOME PHONE: _____ CELL PHONE: _____ WORK PHONE: _____

E-MAIL ADDRESS: _____

DATE OF BIRTH: _____ PLACE OF BIRTH: _____

GENDER: _____

EMPLOYER: _____ Position: _____

Address: _____ Phone: _____

City: _____ State: _____ Zip: _____

Supervisor: _____

HAVE YOU VOLUNTEERED AT CAMP TO BELONG BEFORE? Yes No
If yes, which location? _____ When? _____

DO YOU SPEAK MORE THAN ONE LANGUAGE? Yes No
If yes, please list those languages in which you are proficient: _____

DRIVER'S LICENSE (#, STATE ISSUED BY, AND EXPIRATION DATE): _____

Has your driver's license ever been suspended or revoked? Yes No
If yes, attach a signed document indicating the nature and circumstances of the action taken against you.

Have you ever been convicted of a crime? (Exclude any minor traffic violations for which the fine was \$50 or less before April 5, 1985 or \$100 or less on or after April 4, 1985.) Yes No

Have you ever been arrested for a crime? Yes No

If yes, attach a signed document indicating the nature and circumstances of the crime(s).

Camp To Belong requires clearances for all volunteers through the Department of Justice, Child Abuse Index and/or Investigative firms. Do you give Camp To Belong Maine consent to obtain these clearances with regards to you serving as a volunteer at Camp To Belong Summer Camps? Yes No

If no, we will not be able to continue the application and interview process.

FOR NEW APPLICANTS ONLY

RESIDENCY HISTORY:

Previous address #1

Address: _____

City: _____ State: _____ Zip: _____

Length of Residency: _____

Previous address #2

Address: _____

City: _____ State: _____ Zip: _____

Length of Residency: _____

EMPLOYMENT HISTORY:

Present

Employer: _____ Position: _____

Address: _____ Phone: _____

City: _____ State: _____ Zip: _____

Supervisor: _____

Last 2 Employers

Employer 1: _____ Dates of Employment: _____

Position: _____

Responsibilities: _____

Reason for leaving: _____

Employer 2: _____ Dates of Employment: _____

Position: _____

Responsibilities: _____

Reason for leaving: _____

VOLUNTEER EXPERIENCE:

Are you volunteering as a paid representative of your agency or business? Yes No

Are you volunteering on your personal time? Yes No

Please list all past and current volunteer experiences:

1. _____
2. _____
3. _____
4. _____

What interested you in volunteering with Camp To Belong Summer Camps?

Describe any experience you have had with children in foster care, adoption or kinship care.

REFERENCES: (NEEDED ONLY FOR APPLICANTS WHO HAVE NOT VOLUNTEERED AT CAMP TO BELONG MAINE)

List three persons, not relatives, who have knowledge of your character, experience, and ability to work with Camp To Belong Summer Camps. IT IS YOUR RESPONSIBILITY TO MAKE COPIES OF THE ENCLOSED REFERENCE SHEET AND FORWARD THEM TO YOUR REFERENCES. To expedite the process you may want to include a self-addressed envelope for the reference to be returned directly to Camp To Belong Maine. References can also be submitted electronically to heidi@camptobelong.org

Name: _____
Relationship: _____ Years acquainted: _____

Name: _____
Relationship: _____ Years acquainted: _____

Name: _____
Relationship: _____ Years acquainted: _____

EDUCATION:

Degree(s) held: _____

Field of study: _____

If student, list school currently attending: _____

Year in school: _____

HEALTH:

Date of last TB test: _____

Health status: _____

Do you have any health issues that would pose a risk to campers or staff? Yes No

If yes, please elaborate: _____

Do you have any health issues that would prevent or limit your participation in camp activities? Yes No
If yes, please elaborate: _____

Do you have current CPR training: Yes Expiration date: _____ No
Do you have current First Aid Training: Yes Expiration date: _____ No

Do you have current specific training on appropriate ways to restrain youth? Yes Expiration date: _____ No
If yes, please include verification of training.

EMERGENCY INFORMATION:

In the case of an emergency, please list those individuals we should contact.

Name: _____ Relationship to you: _____
Address: _____
Phone Number: _____

Name: _____ Relationship to you: _____
Address: _____
Phone Number: _____

So that we all may start to get to know one another prior to the camp week, please include a short biography of yourself that will be shared with all volunteer counselors in future mailings.

PERSONAL BIO:

T-Shirt and Sweatshirt size **Adult S** **Adult M** **Adult L** **Adult XL** **Adult XXL**

FOR VETERAN COUNSELORS ONLY:

Has your involvement with Camp To Belong affected your life outside of camp? For example, if you are a caseworker or if you work with youth in any way, how has the way you do your job been impacted? Do you think more about the importance of the sibling relationship? If so, please explain.



Your Volunteer Commitment:

The Camp week is not finished until all campers have been connected with their care providers for their return home and Camp To Belong Maine has cleaned and packed to leave Camp Wigwam. The following is a list of closing activities that need to be completed before counselors are considered finished with the camp week. If you are traveling via plane, please plan your flights so that you depart Camp after 3 p.m. You must contact the Director in advance if other arrangements must be made.

ALL COUNSELORS MUST COMPLETE THE INFORMATION BELOW. (New counselor applicants should also complete the information below so that it is available in the event you are selected as a volunteer counselor.)

Please rank the choices below in order of preference, using one number one time only, with 1 being first choice and 5 being last choice.

For example, if you really want to escort to Bangor, you would choose 1. If you have no desire to type camper reports, you would choose 5.

I would like to...

Serve as a staff escort to Augusta	1	2	3	4	5
Serve as a staff escort to Bangor	1	2	3	4	5
Serve as a staff escort to Portland	1	2	3	4	5
Remain at camp to assist in completion of camper reports and thank you notes	1	2	3	4	5
Remain at camp to pack and load supplies and conduct final inspection	1	2	3	4	5

If you are traveling from one of the pick-up/drop-off locations and can get a ride to camp, you can ride the van/bus back to that location as a staff escort. More details will be confirmed closer to the dates of camp.

* * * * *

I understand the opportunity to participate in Camp To Belong Summer Camp is a volunteer position, and, therefore, money for services will not be exchanged. If I am traveling to a camp site outside of my home geographic area, I understand I am responsible for all transportation costs to and from Summer Camp.

I understand that I will participate in volunteer training starting with reviewing documents that may come through regular mail and e-mail prior to camp, as well as attend on-site pre-camp training as included in the dates noted above.

I understand that my commitment to the camp week does not end until all campers are connected with their care providers for the return home and that all end-of-camp tasks have been completed (typically finished by 3 p.m.). I must contact the Camp Director in advance if other arrangements need to be made.

I authorize investigation of all statements herein and release Camp To Belong and all others from liability in connection with it. I understand that if I am chosen to volunteer, it will be at-will, and any agreement to the contrary must be in writing and signed by Camp To Belong. I also understand that untrue, misleading or omitted information herein or in other documents completed by the applicant will result in dismissal regardless of the time of discovery by Camp To Belong.

I understand that if I am accepted to be a volunteer counselor and make the commitment to be a volunteer counselor, my participation is counted into the ratio of how many campers are accepted. If I back out at the

last minute, the ratio of campers to counselors (2:1) is negatively impacted, so I will make every attempt to fulfill my commitment and plan for my full participation once I make the commitment.

I understand that if I submit this form electronically, I am agreeing to the above and my signature is implied.

APPLICANT'S SIGNATURE: _____

Camp To Belong Maine is a non-profit organization and gives equal opportunity to all volunteers.

Return your application to

Heidi Krieger, Director, Camp To Belong Maine, PO Box 8077, Portland, ME 04104



Camp To Belong Volunteer Reference Questions (for new applicants only)

_____ is applying to be a volunteer counselor at a Summer Camp session(s) for Camp To Belong and has listed you as a reference. Camp To Belong is a non-profit organization dedicated to reuniting brothers and sisters placed in separate foster homes or other out-of-home care (www.camptobelong.org). Our counselors spend a week with the siblings in a camp environment. We would appreciate it if you would answer the following questions and send the form back to us within ten days of receipt. Feel free to use an additional sheet of paper if necessary.

Please return the form to
Heidi M. Krieger
Camp To Belong Maine Director
PO Box 8077
Portland, ME 04104

1. How long have you known the applicant, and in what capacity?

2. Have you seen the applicant interact with children? If yes, what stands out?

3. Is the applicant a leader/initiator or a follower? Explain

4. Is the applicant self-motivated, or does he/she need others for motivation?

5. How does the applicant handle conflict?

6. Would you consider the applicant to be flexible? Responsible? Loyal?

7. Does the applicant have a sense of humor?

8. Does the applicant like individuality and/or to be part of a team?

9. What kind of patience level does the applicant have?

10. Why do you think the applicant wants to be a counselor?

11. Would you recommend the applicant to take care of your children? To be a counselor at camp?

PLEASE PRINT NAME: _____

SIGNATURE: _____

MAY WE CONTACT YOU IF WE HAVE ADDITIONAL QUESTIONS? YES NO

IF YES, BEST NUMBER OR E-MAIL TO REACH YOU: _____