



SKYVIEWRANCH

Employment Application

7241 Township Road 319, Millersburg, OH 44654
camp@skyviewranch.org www.skyviewranch.org
Phone: (330) 674-7511 Fax: (330) 674-4606

PERSONAL INFORMATION

Please complete the following information:

Full Name: _____ Date: _____

Position Applying for: _____ Start Date: _____

Applying for: Volunteer Counselor In Training Summer Staff Apprenticeship

Birth Date: _____ Age: _____

Email: _____ Cell: _____ Home Phone: _____

Permanent Address: _____ City: _____ State: _____ Zip: _____

Current College Address: _____ City: _____ State: _____ Zip: _____

Can you, upon employment, submit verification of your legal right to work in the US? Y N

Do you have a valid Driver's License? Y N Height: _____ Weight: _____

Marital Status: Single Engaged Married Divorced Separated Widow

T-Shirt Size: Small Medium Large XL 2 XL 3 XL

Name of Parents: _____ Name/ Age of Siblings: _____

Name / Age of Children: _____

Home Church: _____ Pastor's Name: _____

Church Address: _____ City: _____ State: _____ Zip: _____

Are you a member of your church? Y N How often do you attend? _____

Do you agree with your church? Y N If no, please explain on a separate sheet of paper.

EDUCATION AND TRAINING

Please list your last 3 schools or colleges, with the most recent first:

	Name of School	Years Completed	Field of Study/ Major	Degree/ Certificate
1.				
2.				
3.				

EMPLOYMENT HISTORY

Have you been previously employed or volunteered at Skyview Ranch?

Y N

If yes, please list position and dates: _____

Current Employer:

Company Name: _____ Dates Employed: _____ Company Phone: _____
Supervisor Name: _____ Job Title: _____ Reason for Leaving: _____
Address: _____ City: _____ State: _____ Zip: _____

Most Recent Former Employer:

Company Name: _____ Dates Employed: _____ Company Phone: _____
Supervisor Name: _____ Job Title: _____ Reason for Leaving: _____
Address: _____ City: _____ State: _____ Zip: _____

REFERENCES

Please list 4 personal (not related) references who have knowledge of your character, experience and abilities.

	Name	How does this person know you?	Phone Number
1.			
2.			
3.			
4.			

NOTE: It is your responsibility to give reference forms and addressed/ stamped envelopes to your references listed above. Your application is not complete and will not be processed until all reference forms have been received. Please include a Pastoral and an Employer Reference.

OTHER INFORMATION

1. Profile your character using three positive and three negative adjectives:

Positive: _____

Negative: _____

2. Your relationship with your father is/ was: Cold Casual Warm Terrific

3. Your relationship with your mother is/ was: Cold Casual Warm Terrific

4. Do you have any previous or existing medical or psychological conditions?

Y N

If yes, please specify: _____

5. When under pressure, you normally react by: (Please provide specific example)

6. Who is the most influential person in your life? Why? _____

7. Do you believe the Bible teaches:

- | | | | | |
|--|---|--------------------------|---|--------------------------|
| One true, triune God? | Y | <input type="checkbox"/> | N | <input type="checkbox"/> |
| The inerrancy of Scripture? | Y | <input type="checkbox"/> | N | <input type="checkbox"/> |
| The urgency for all to be saved? | Y | <input type="checkbox"/> | N | <input type="checkbox"/> |
| The command for all believers to be baptized? | Y | <input type="checkbox"/> | N | <input type="checkbox"/> |
| The importance of local church membership? | Y | <input type="checkbox"/> | N | <input type="checkbox"/> |
| The six-day creation of the world by God? | Y | <input type="checkbox"/> | N | <input type="checkbox"/> |
| The virgin birth of Christ? | Y | <input type="checkbox"/> | N | <input type="checkbox"/> |
| The eternal security of the believer? | Y | <input type="checkbox"/> | N | <input type="checkbox"/> |
| Premillennial return of Christ? | Y | <input type="checkbox"/> | N | <input type="checkbox"/> |
| Speaking of tongues today? | Y | <input type="checkbox"/> | N | <input type="checkbox"/> |
| That marriage is only between one man and one woman? | Y | <input type="checkbox"/> | N | <input type="checkbox"/> |
| Abstinence before marriage? | Y | <input type="checkbox"/> | N | <input type="checkbox"/> |

8. Have you ever used any other name(s) which is (are) necessary for us to know to enable us to verify your employment and educational record?

Y N

If yes, please specify: _____

9. Do you feel there are any hindrances that keep you from meeting the expectations of the position you are applying for?

Y N

If yes, what would hinder you? _____

10. Please indicate any special training or certifications you hold:

- | | | | |
|---------------------------------------|---------------------------------------|--------------------------------------|--|
| <input type="checkbox"/> Water Safety | <input type="checkbox"/> Rifles | <input type="checkbox"/> Computers | <input type="checkbox"/> High Ropes/ Adventure Program |
| <input type="checkbox"/> First Aid | <input type="checkbox"/> Horsemanship | <input type="checkbox"/> Lifeguard | <input type="checkbox"/> Archery |
| <input type="checkbox"/> CPR | <input type="checkbox"/> Maintenance | <input type="checkbox"/> Other _____ | |

11. Please describe any other skills that may have a bearing on the position(s) for which you are applying.

12. Please list and describe your two greatest weaknesses.

13. Have you ever been convicted of a crime?

Y N

If yes, please specify: _____

14. Please briefly describe your testimony of Salvation, current Christian growth and Christian service.

15. When was the last time you spoke with someone about Christ? Please give details about the conversation.

16. Please explain your plan to grow spiritually.

17. Are there any areas in your life, by Biblical standards, which could be considered out of balance?

18. Are there any areas of sin that you struggle with in your life?

19. What do you expect to give and receive from your experience as a staff/volunteer at Skyview Ranch?

20. How would working at Skyview Ranch help prepare you for your personal or vocational plans?

21. What positive contributions can you make at Skyview Ranch?

22. What are your current church/ministry activities?

23. What are your interests and hobbies?

24. If applying for a summer position, are you available for the entire summer (Memorial Day-first week of August)?

Y N

If no, please give specific dates & reason: _____

25. If applying for the apprenticeship program, are you available for the entire Apprenticeship Year (Memorial Day-April)?

Y N

If no, please give specific dates & reason: _____

26. Apprenticeship applicants only: Please complete attached addendum.

APPLICANT CERTIFICATION
PLEASE READ CAREFULLY AND SIGN

I warrant that the facts set forth above are true and complete. I understand that if I am employed, falsification of this application (including falsification by omission or supplying misleading information) may result in dismissal regardless of when such falsification is discovered.

I authorize Skyview Ranch to investigate all information contained in this application. I authorize the prior employers to give Skyview Ranch any and all information concerning my previous employment and any pertinent information that they may have and release all parties from any and all liability for any damage or injury that may result from furnishing the same to Skyview Ranch.

I also authorize any educational institution that I have attended or am currently attending to give Skyview Ranch any and all information concerning my educational history and any pertinent information they may have and release all parties from any and all liability for any damage or injury that may result from furnishing the same to Skyview Ranch.

Sign: _____ Date: _____

I have read to completion, understand and agree to the doctrinal statement as put forth by Skyview Ranch. See [www. skyviewranch.org/about/doctrinal-statement](http://www.skyviewranch.org/about/doctrinal-statement) to read the Skyview Ranch doctrinal statement.

Sign: _____ Date: _____

If I am employed by Skyview Ranch, I agree to conform to the rules and policies of Skyview Ranch. I also understand and agree that while employed, my hours, working conditions, job assignment(s), and compensation rate(s) are subject to change by Skyview Ranch, except for my status as an at-will employee.

Sign: _____ Date: _____

APPRENTICESHIP ADDENDUM

Please complete the following questions. *Apprenticeship Applicants only*

1. What are your expectations about an Apprenticeship at Skyview Ranch?

2. The Apprenticeship Program is intense in that your life and schedule will be imposed upon by the needs of our guests. Explain your commitment level to the Apprenticeship Program.

3. What are your full time vocational plans?

4. What can Skyview do to help you meet your vocational training goals in the Apprenticeship Program?
Please be specific.
