



## 2017 Camp Staff Application

CONFIDENTIAL

Name \_\_\_\_\_ Today's Date \_\_\_\_/\_\_\_\_/\_\_\_\_\_  
Home Address \_\_\_\_\_ Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_\_  
City, State, Zip \_\_\_\_\_ Home Phone (\_\_\_\_) \_\_\_\_\_  
E-mail \_\_\_\_\_ Cell Phone (\_\_\_\_) \_\_\_\_\_  
Social Security # \_\_\_\_\_ (Necessary to process payment)

1. What position you are applying for? \_\_\_\_\_ Main Trainer  
\_\_\_\_\_ Assistant Trainer  
\_\_\_\_\_ Other (explain) \_\_\_\_\_

2. Why do you desire to serve with AIA Soccer Camps?

3. What specific things are you hoping to contribute to this ministry as you work with the children/AIA team/community/church?

4. What activities or positions of leadership have you been involved with in your school, church, or community?

5. Do you attend church? \_\_\_\_\_ Yes: Name of church \_\_\_\_\_  
\_\_\_\_\_ No

6. Briefly explain your understanding of the gospel and salvation in Jesus Christ.

(Continued on other side)

7. Briefly share what it means to you “to have a personal relationship with Jesus Christ.”

Safety Training & Background Check

By signing below, I acknowledge that **if approved to serve**, I will need to submit to a **background check**. I will also be provided with **safety training** material which I am required to read, understand, and commit to implementing and adhering to as I minister to and care for the campers.

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Applicant: \_\_\_\_\_

References

Please list people of the following categories who know you well and who we may contact as references.

**Teacher/Pastor/Coach/Supervisor**

Name \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_

E-mail \_\_\_\_\_

**Friend (Applicants under 18, choose an adult family friend who has known you for at least 2 years.)**

Name \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_

E-mail \_\_\_\_\_

I declare by my signature below that to the best of my knowledge, all the information on this application is true and complete. I also authorize you to make such inquiries as may be necessary in arriving at an acceptance decision. I hereby release schools, employers, or other persons from liability in responding to inquiries in connection with my application.

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

Submit the completed application to Ken Akselsen:

1. Scan and email to: [ken.akselsen@athletesinaction.org](mailto:ken.akselsen@athletesinaction.org)
2. Or, mail to: Athletes in Action, 1615 Glendola Rd, Wall, NJ 07719 (Please retain a copy for your records.)