

HIGH SCHOOL APPRENTICE APPLICATION

This is a volunteer position. Room and board will be the only compensation. Please consider prayerfully this opportunity for service at Camp Li-Wa. The work will not always be easy, but should cause you to grow in many areas of your life. Camp Li-Wa reserves the right to dismiss those who do not meet the requirements of this position.

To insure consideration, applications must be completely filled out and returned. Send application to Camp Li-Wa, P.O. Box 10434, Fairbanks, AK 99710.

Name: _____ Date: _____

E-mail Address: _____ Phone: _____

Home Address: _____

City: _____ State: _____ Zip: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

E-Mail: _____

School You Attend: _____ Grade in Fall

Date of Birth: _____ Age: _____ Parent's Name: _____

Church you attend: _____ Pastor: _____

How often do you attend church for any kind of service or activity? _____

When you DO attend church, in which activities are you regularly involved? _____

Are there any reasons why your duties might be limited due to physical limitations or disabilities? No _____ Yes _____ (Explain on the enclosed health and medical summary.)

Describe your health: Excellent _____ Good _____ Fair _____

Why are you applying for this position? _____

What experience have you had doing yard work, housekeeping, dishes, setting tables, cleaning toilets and showers? _____

Have you been to Camp Li-Wa before? _____ Under what circumstances? _____

Please read care-fully and sign, along with a parent.

Briefly state your beliefs regarding the following: (Use another sheet if more space is needed.)

The Bible:

Prayer:

Salvation:

Jesus Christ:

Please give a brief account of your relationship with Christ and how and when you became a Christian.

What are your personal feelings about the following:

Alcohol:

Habit Forming Drugs:

Tobacco:

Sex Outside of Marriage:

Employment History: List most recent employment first.

Employer's full name and address	Type of Work	Dates

References: Please give the name and telephone number of your pastor, and one adult outside your immediate family.

Pastor: _____ Phone: _____
Adult: _____ Phone: _____

Commitment: I, _____, am willing to obey the rules of Camp Li-Wa and to follow the instructions of those who supervise me. I choose to cooperate fully in every regard, and to explore opportunities available for spiritual growth. I understand that anyone demonstrating a negative attitude or a poor quality of service is subject to dismissal.

Signature of Applicant: _____ Date: _____

Parental Agreement: I have read the statement of commitment above and understand its importance. I will not hold Camp Li-Wa or Victory Ministries, Inc. responsible for injury or illness incurred by my child while attending Camp Li-Wa. I agree to have my child work at Camp Li-Wa under the prescribed conditions.

Parent's Signature: _____ (Please also fill out and sign the enclosed Health and Medical Summary.)

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