



Smoky Mountain Christian Camp (Volunteer)

Volunteer Application

Applicant Information

Full Name: _____ **Date:** _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

City State ZIP Code

Phone: _____ **Email:** _____

Week applying for: _____ Social Security No.: _____

Position Applied for: **Volunteer** **M** **F**

Have you ever worked for SMCC? YES NO If yes, when? _____

Education

High School: _____ Address: _____

From: _____ To: _____ Did you graduate? YES NO Diploma: _____

College: _____ Address: _____

From: _____ To: _____ Did you graduate? YES NO Degree: _____

Other: _____ Address: _____

From: _____ To: _____ Did you graduate? YES NO Degree: _____

References

Please list three references.

Full Name: _____ Relationship: _____
Company: _____ Phone: _____
Address: _____

What are your strengths and weaknesses?

I certify that my answers are true and complete to the best of my knowledge.

*I understand that if I want to volunteer with SMCC I **MUST** attend the volunteer training days at camp during the dates of May 31 through June 1 .*

Signature: _____ Date: _____

Rules:

- *No drug or alcohol abuse*
- *No weapons of any kind*
- *No foul language of any kind*
- *No disrespect to campers, faculty, or camp property at any time*
- *No romantic or sexual relations of any kind*

**I understand that by signing this I agree to the rules and regulations set by SMCC and will Adhere to them during my time volunteering.*

Signature: _____ Date: _____