

Camp ElimApplication for Employment

Camp Elim 4859 The Lakes Way P.O. Box 4117 Forster NSW 2428 02 6554 0277 campelim@campelim.org.au

Date of Applicat	ion:							
Job(s) applying for:								
Personal I	nformation							
Full Name:								
Address:								
Phone:		M	obile:					
Email Address:								
Age:		DOB:						
WWCC Number	:							
Experienc	e							
What are your in	nterests and hobbies?							
What gifts, skills and abilities do you have that could be used at Camp Elim?								
Christian	Commitment							
	you currently attend? ve in your church?							
	what a Christian is:							
briefly explain w	mat a Christian is.							

How did you become a Christian?					
Referees					
Character re	feree				
Name:					
Phone:					
Occupation:					
Email:					
What is your a	ssociation with this referee?				
Pastor/Minister referee					
Name:					
Phone:					
Job title:					
Email address					
Work referee					
Name:					
Phone:					
Occupation:					
Email:					
	u worked together:				
What is your association with this referee?					

Essential and Desirable attributes (See job description)

In this section you need to address the essential and desirable attributes contained in the job description

Essential at	ributes:				
Desirable a	tributes:				
Declara	tion				
I confirm the above information is correct and that I would be supportive of furthering the Christian faith at Camp Elim. I understand that any misleading statements or omissions made by me may be sufficient grounds for cancelling any agreements made.					
Signature:		Date:			