

A MINISTRY OF AMERICAN BAPTIST CHURCHES OF NEW JERSEY
79 Blossom Hill Rd, Lebanon, NJ 08833
Phone: (908) 236-2638
www.camplebanon.com hgierman@camplebanon.com



Camp Lebanon (Baptist Camp and Conference Center) is committed to providing a safe environment where everyone can experience the transforming power of God's love and find support through healthy relationships and activities in a beautiful outdoor setting. We are a ministry of the American Baptist Churches of New Jersey and seek to offer camping programs that provide opportunities for persons to become aware of God's love as revealed in Jesus Christ and to respond to Jesus in faith and love through personal commitment and growth. We invite all campers and volunteers to come and enjoy a summer in the beautiful outdoors with our leaders, staff, and campers.

Step #1

If you are interested in serving as a Summer 2024 Staff Member, please fill out and return the completed application to:

Camp Lebanon
79 Blossom Hill Road, Lebanon, NJ 08833
or to Bgierman@camplebanon.com or hgierman@camplebanon.com

Step #2

Review Application - Check References - Complete Background Check

If you are selected for a staff position, we will set up a time for a virtual, phone or in-person interview.

Step #3

If you are invited to serve in a role during our Summer 2023, you will be required to attend the training/orientation. We hope you come to camp rested, healthy and in a good space to serve and show love to our amazing campers, volunteers, and staff.

ABCNJ is an equal opportunity employer and practices non-discrimination.



A MINISTRY OF AMERICAN BAPTIST CHURCHES OF NEW JERSEY
79 Blossom Hill Rd, Lebanon, NJ 08833
Phone: (908) 236-2638
www.camplebanon.com hgierman@camplebanon.com



Summer 2024 Staff Application

Applying for:

Summer: May 26th - August 3rd
 Post Camp: August 3rd to Sept 1st

Do you have any prior commitments that will conlift with your potential working dates? Please explain. _____

Position applying for (indicate order of preference)

- o Kitchen
- o Lifeguard/Waterfront
- Maintenance

Personal Information

Name:
Date of Birth
(please note minimum age to work is18)
Address:
Phone number: (Home)(Cell)
Email:
What is the best way to contact you?
What church are you affiliated with?
Church address:
What is your highest level of education?
If you are a college student, what is your major?
If you are a college graduate, what degree do you hold?



A MINISTRY OF AMERICAN BAPTIST CHURCHES OF New JERSEY 79 Blossom Hill Rd, Lebanon, NJ 08833 Phone: (908) 236-2638



www.camplebanon.com hgierman@camplebanon.com

Do you hold any of the following certifications?

	YES	NO	Expiration Date
Cardiopulmonary Resuscitation (CPR)			
First Aid			
Automatic External Defibrillator (AED)			
Lifeguard			
Have you ever been convicted of a miso If yes, please explain			
Have there been any allegations of mis (this includes charges of sexual miscor abuse of power, etc). Yes No allegations and the manner in which the manner	nduct, ch _ If yes, p	ild ab lease	use, financial impropriety, explain the nature of the
Past Employment- list previous two	-		
Employer_			
Address Phone number Nature of work	_Dates e	mploy	ved
Employer			
Address			
Phone number	Dates e	mploy	ved
Nature of work			



A MINISTRY OF AMERICAN BAPTIST CHURCHES OF New JERSEY
79 Blossom Hill Rd, Lebanon, NJ 08833
Phone: (908) 236-2638
www.camplebanon.com hgierman@camplebanon.com



Camp Experience

Were you a camper here at Camp Lebanon?					
Have you been on staff here or any another camp? If yes, what position(s) did you hold?					
Name of camp (if different than Camp Lebanon)					
Address					
DirectorDates attended/worked					
Please briefly answer the following questions:					
Describe any experience you have that is relevant to the position(s) you are applying for (work, school, sports, church, extra-curricular activities, etc.).					
What contribution do you think you can make at Baptist Camp Lebanon?					
Other Information Smoking cigarettes, vaping, and use of alcohol and non-prescription drugs is prohibited while at Camp Lebanon. Will you abide by this regulation? Yes No					
Camp Lebanon's mission statement is to "make available opportunities for participants to live in a natural outdoor setting and in relationship with others in Christian community." Are you willing to contribute to that goal by upholding a high standard of work ethic and attitude as a volunteer? Yes No					
For the safety of yourself and others, do you agree to follow written and spoken instructions given by Camp Lebanon Staff and leadership while participating in our programs? Yes					



Pastor or Church Leader:

Applicant signature:_

CAMP LEBANON

A MINISTRY OF AMERICAN BAPTIST CHURCHES OF New JERSEY
79 Blossom Hill Rd, Lebanon, NJ 08833
Phone: (908) 236-2638
www.camplebanon.com hgierman@camplebanon.com



_Date:____

REFERENCES (Do not list relatives. References need to have known you for at least six months):

Name:	
Title/Role in applicant's life:	
Address:	
Phone #	Email
Personal Reference	
Name:	
Title/Role in applicant's life:	
Address:	
Phone #	
Personal Reference	
Name:	
Title/Role in applicant's life:	
Address:	
Phone #	Email
	and Conference Center to request, receive, to character, ability, reliability, and other association with the Baptist Camp and
Applicant signature:	Date:
I release all persons serving as references that if my behavior and work ethic does	ation I've supplied here is true and accurate. s from any liability. I understand and agree not reflect a true ability to serve alongside promise the mission of the program, I may be



A MINISTRY OF AMERICAN BAPTIST CHURCHES OF New JERSEY
79 Blossom Hill Rd, Lebanon, NJ 08833
Phone: (908) 236-2638
www.camplebanon.com hgierman@camplebanon.com



BACKGROUND INVESTIGATION CONSENT

I,(applicar	nt complete name), hereby authorize Baptist Camp and
Conference Center and/or its agents to make	an independent investigation of my background,
references, character, past employment, educa	ation, criminal or police records, including those
maintained by both public and private organiz	cations and all public records for the purpose of
confirming the information contained on my a	application and/or obtaining other information, which
may be material to my qualifications as a volu	inteer or for employment now, and if applicable, during
the tenure of my volunteering or employment	with Baptist Camp and Conference Center.
	nter and/or its agents and any person or entity, which
<u>-</u>	cation, from any and all liabilities, claims, or lawsuits in
regard to the information obtained from any a	nd all of the above referenced sources used.
	name, and all information is true and correct to the best of
my knowledge.	
Print full name:	
i init tun name.	
Maiden name or other names used:	
How long have you lived at your current addr	ess?
Previous address:	
How long did you live at that address?	
now long the you live at that address:	
Date of birth:	Social security #:
Driver's license #:	State of license:
Signature:	
Data	
Date:	
FOR OFFICE USE ONLY	
	esult: Checked by:
Tibol II Onched. Date.	Checked by



A MINISTRY OF AMERICAN BAPTIST CHURCHES OF New JERSEY
79 Blossom Hill Rd, Lebanon, NJ 08833
Phone: (908) 236-2638
www.camplebanon.com hgierman@camplebanon.com



ALL APPLICANTS UNDER THE AGE OF 18 COMPLETE THE FOLLOWING:

(All statements become part of any future employee personnel files.)

Mother's Name:		Phone:
Father's Name:		Phone
Parents' Address:		
request, receive ability, reliabi	e, use and give up lity, and other asp	ptist Camp and Conference Center to pon request, references as to character, spects of my person as it pertains to my ist Camp and Conference Center.
Applicant Signature	: 	
Parent Signature:		