



**Moose Lake Gospel Camp
Staff Application**

Instructions

This application must be completed by anyone wishing to be involved in the supervision or instruction of minors (persons under the age of 19) under the authority of Moose Lake Gospel Camp, whether paid or volunteer. In order for MLGC to provide a secure environment both for the children it ministers to and also the leaders that minister, the following questions must be answered honestly and completely.

The MLGC Board Members/ Directors will keep all information strictly confidential. (Police may access this information under warrant, if requested.) Any questions of a sensitive or personal nature may be discussed with the MLGC Board/ Director upon completion and may not necessarily preclude your involvement in children's ministry.

Personal Background

Name: _____

Address: _____

Home telephone: _____ Work telephone : _____

Email address: _____

Date of Birth: _____ Sex: M / F

Have you worked at Moose Lake Gospel Camp Before? Yes / No

What Staff position are interested in serving at MLGC? _____

Do you have a driver's licence? If yes, the license Number is: _____

If no, please explain: _____

Do you have previous experience working with children? Please provide the name of the organization you worked under, time frame and responsibilities.

How long have you been a Christian? _____

Which Church do you currently attend? _____

Pastors name: _____ Phone: _____

Briefly Share your Testimony: _____

How do you hope to contribute spiritually to the life of the camp?

Confidential Information

It is necessary to include the following questions as part of the application. All information will be kept in strictest confidence. Answering yes to any of the following questions may not necessarily disallow your involvement in ministry.

1. Do you have a criminal record or have you ever been convicted of a criminal offence?

2. Have you ever used or sold drugs? _____
3. Have you ever been accused or arrested for any sexual or abusive crimes? _____
4. Do you have or have you ever had any psychiatric health problems? _____

If you answered yes to any of the above questions, please explain. _____

References:

Please provide the names of two individuals, excluding relatives, who could provide a reference for you.

1. Name: _____
Address: _____
Phone number: _____
How are you connected to this reference person? _____

2. Name: _____
Address: _____
Phone number: _____
How are you connected to this reference person? _____

Release of Information:

I give Moose Lake Gospel Camp permission to contact the people I have listed as references to determine my suitability for ministry.

I will give Moose Lake Gospel Camp a personal criminal record check, if deemed necessary, for the purpose of my protection against any false allegations and for the protection of those I serve. I consent to providing the criminal records check at my own expense, with the understanding that the results will be kept confidential.

I hereby certify that all information contained in this application, to the best of my knowledge, is accurate and true. Should my application be accepted, I agree to be bound by the MLGC disciplinary processes.

Applicant's Signature: _____
Date: _____

Applications must be submitted by June 15th

Please return application form to MLGC by Mail, Fax, or scan and Email.

**MLGC
C/O: Christina Mutch
Box 161
Glendon, AB T0A 1P0
Fax: (780) 635-4295
Email: mlgc@mlgc.ca**

For additional information please call: (780) 547-4332