



STAFF APPLICATION

Northern Youth
P R O G R A M S

Submitting this form does not place you or us under any obligation. The information that you provide here will help us to become better acquainted with you and to work with you toward a possible worker's assignment.

Date of Application (Month/Day/Year) _____

Applicant's Full Name _____

Applicant's Age _____

POSITION

1. Please indicate the position(s) in which you have interest.

Long Term (Year Round)

- ☐ Admin
- ☐ Bookkeeper
- ☐ Cook
- ☐ Counsellor
- ☐ Graphic Designer
- ☐ Host and Hostess
- ☐ Housekeeper
- ☐ It
- ☐ Maintenance
- ☐ Mechanic
- ☐ Pilot
- ☐ Pastor
- ☐ School Teacher
- ☐ Secretary
- ☐ Youth Worker
- ☐ Other: _____

Short Term (Summer Months)

Beaver Lake Camp

- ☐ Camp Pastor
- ☐ Cook
- ☐ Craft Teacher
- ☐ Maintenance
- ☐ Nurse
- ☐ Secretary
- ☐ Support Ministries
- ☐ Youth Worker
- ☐ Other: _____

Community Ministries

- ☐ Youth Worker

PERSONAL DATA

2. First Name: _____

Middle Name: _____

Last Name: _____

3. Gender: ☐ Male ☐ Female



4. Mailing Street Address: _____
City: _____
Province/State: _____ Postal/ZIP Code: _____
5. Physical Street Address: (if different from above) _____
City: _____
Province/State: _____ Postal/ZIP Code: _____
6. Home Phone Number: _____
7. Cell Phone Number: _____
8. Work Phone Number: _____
9. Fax Number: _____
10. Email Address: _____
11. Social Networks: _____
12. Birth Date: (Month/Day/Year) _____
13. Birthplace: (City Province/State) _____
14. Social Insurance/Security Number: _____
15. Passport Number: _____
Expiry Date: (Month/Day/Year) _____
Issuing Country: _____
16. Driver's License Number: _____
Issue Date: (Month/Day/Year) _____
Expiry Date: (Month/Day/Year) _____
17. Marital Status:
- ☐ Single
- ☐ Courting
- ☐ Married (wedding date) (Month/Day/Year): _____
- ☐ Widow(er) (spouses death date) (Month/Day/Year): _____
- ☐ Children moving with you (continue on separate sheet as necessary)
- Full Name: _____
- Birth Date: (Month/Day/Year) _____
- Full Name: _____
- Birth Date: (Month/Day/Year) _____
- Full Name: _____
- Birth Date: (Month/Day/Year) _____
- Full Name: _____
- Birth Date: (Month/Day/Year) _____

FAMILY

18. Parents' Names: _____
19. Address: _____
City: _____
Province/State: _____ Postal/ZIP Code: _____
20. Phone Number: _____
21. Fax Number: _____
22. Email Address: _____
23. Church: _____
24. Are your parents in harmony with your desire and plans to serve with us? ☐ Yes ☐ No

CHRISTIAN LIFE

25. Name of Home Church: _____
Denomination: _____
Conference: _____
Church Street Address: _____
City: _____
Province/State: _____ Postal/ZIP Code: _____
26. Pastor's Full Name: _____
Street Address: _____
City: _____
Province/State: _____ Postal/ZIP Code: _____
Phone Number: _____
Fax Number: _____
Email Address: _____
27. Do you know Christ as your personal Saviour? ☐ Yes ☐ No
28. Have you been baptised? ☐ Yes ☐ No
29. Are you a church member? ☐ Yes ☐ No
If so, for how long? _____
30. Briefly describe your spiritual journey.

31. How do you feel about the program, leadership, and discipline of your church?

32. List several doctrinal positions of your church that you feel are important to you and explain why you feel they are important.

33. What is your tolerance and/or cooperation with people who do not hold your exact beliefs?

34. How do you feel people should resolve differences and conflicts that arise?

35. Will you be willing to take advice or correction from administration and other mission staff as it relates to your work? ☐ Yes ☐ No

36. Will you be willing to give up any personal or social habits that might lessen your effectiveness in ministry?
☐ Yes ☐ No

37. Write about your present personal devotional and prayer life.

38. Have you ever led a person to Christ? ☐ Yes ☐ No

If so, give details. _____

39. Why are you interested in being part of God's work at Northern Youth Programs today?

CIVIL AND MORAL HISTORY

40. Have you had sexual activity outside of marriage? ☐ Yes ☐ No

41. Have you ever used pornography? ☐ Yes ☐ No

If so, when was the last time? _____

42. Have you ever been the perpetrator in the actual or attempted sexual molestation or abuse of a minor?

☐ Yes ☐ No

43. Have you ever been arrested or charged with a criminal offence other than traffic violations? ☐ Yes ☐ No

If yes, please explain. _____

44. Because the position for which you are applying will require you to provide care for children and vulnerable persons, we will complete criminal background checks to finalize your acceptance and to maintain your position with the organization upon employment.

I authorize Northern Youth Programs to use my personal information to complete background checks in Canada and my country of citizenship.

Signature: _____

Date: (Month/Day/Year) _____

(This release is valid from the date of my signature to the length of my entire term of employment with Northern Youth Programs.)

MEDICAL HISTORY (A medical examination will be required to confirm employment.)

45. Current health condition: ☐ Fair ☐ Good ☐ Excellent

46. Do you have any physical weaknesses, allergies, disabilities, or recurring medical problems? ☐ Yes ☐ No

If so, explain. _____

47. Have you suffered from any serious illness or accident? ☐ Yes ☐ No

If so, explain. _____

48. Have you ever been treated for any mental or emotional condition? ☐ Yes ☐ No

If so, explain. _____

49. Family Physician's Name: _____

Street Address: _____

City: _____

Province/State: _____ Postal/ZIP Code: _____

Phone Number: _____

EXPERIENCE AND SKILLS

50. To whom do you feel you best relate? ☐ Children ☐ Youth ☐ Adults

51. What do you do for recreation and what are your hobbies?

52. Are you aware of your spiritual gifts? ☐ Yes ☐ No

If so, please list them. _____

53. What experience have you had in working with people of other nationalities?

54. Mark: I – area of interest E – area of experience T – area of formal training (Mark all three if applicable.)

___Academic Teacher

___Housekeeping

___Administration

___Information Technology

___Art

___Lifeguarding

___Bookkeeping

___Mechanic (☐ Auto, ☐ Diesel, ☐ Airplane)

___Cabinetry

___Music (Voice/Instrument)

___Canoeing

___Music (Song Leading)

___Carpentry

___Nursing Degree

___Childcare

___Photography

___Coaching Sports

___Preaching/Public Speaking

___Cooking

___Leader

___Counselling (professional)

___Secretary

___Crafts

___Swimming

___Electrical Work

___Vacation Bible School

___EMT/First Aid

___Welding

___Equipment Operation

___Youth Work

___Graphic Design

___Other: _____

55. Do you have certification or professional training in any field?

56. Have you been a camper at a camp? ☐ Yes ☐ No

If yes, how many years? _____

57. Have you served on staff at a camp? ☐ Yes ☐ No

If yes, how many years? _____

Camp Name: _____

Address: _____

City: _____

Province/State: _____ Postal/ZIP Code: _____

Job Position: _____

Name of Supervisor: _____

Phone Number: _____

58. What do you feel campers should gain from their experience at Beaver Lake Camp?

59. How can you help this happen?

60. Participating in Aboriginal ministry might involve difficulties including the following:

- a) adjusting to new environments,
- b) managing on a limited income,
- c) living without modern conveniences, and
- d) working in an isolated community.

Please state why you feel that you would be qualified to live and work under the conditions listed above.

61. What are your thoughts about working under Native leaders?

62. Please complete a résumé including the following information and return it with your application:

Employment History (employer's name/address, job responsibilities, dates of employment)

Ministry History (supervisor's name, location of ministry, ministry responsibilities)

Education History (educational institution name/address, field of study, dates of attendance, level of certification achieved)

REFERENCES

63. Please give your parents, pastor, and employer the reference forms to fill out and return to us. We cannot complete your application without these forms returned. If you wish to have someone else also provide a reference, please contact our office via the information below for a Personal Reference form.

LONG TERM STAFF ONLY

64. If applying for full time, when would you be available for service?

(Month/Day/Year): _____

65. Are there any debts that you will not be able to liquidate prior to service? ☐ Yes ☐ No

66. Do you have financial responsibility for anyone else? ☐ Yes ☐ No

67. Will your congregation or other individuals contribute toward your financial support? ☐ Yes ☐ No

SIGNATURE

68. I understand that, as a Christian worker, I should:

- Be a sincere child of God, consecrated, having assurance of salvation.
- Have a heart desiring to serve the spiritual and physical needs of fellow men.
- Be in command of community respect and able to receive recommendation from those who are best acquainted with me.
- Be willing to work faithfully at whatever task I am given.
- Be willing to sacrifice self-interests for the good of the work assigned to me.
- Be willing to work in Christian love and unity with other workers and to respect their viewpoints in the light of God and His Word.



69. I realize that to be accepted as a worker is to be entrusted with a sacred responsibility. In light of this and the above qualifications, I will, by the grace of God, subscribe to a life of:

- Christian purity
- Cooperation
- Daily devotions with my Saviour
- Willingness to serve at assigned tasks
- Thus, I will be an asset to God, my church, my home, and my work.

70. Signature: _____

71. Please attach a recent photograph of yourself.

RETURNING THIS APPLICATION

72. Return this application.

If you are in Canada:

Northern Youth Programs
Attn: Human Resources
Site 306 Box 1 RR 3
Dryden, ON P8N 3G2
Fax: 1.807.937.5524
Email: personnel@nyp.ca

If you are in the USA:

Northern Youth Programs
Attn: Human Resources
PO Box 171
International Falls, MN 56649
Fax: 1.807.937.5524
Email: personnel@nyp.ca