



# Louisiana Lions Camp

292 L. Beauford Dr. Anacoco, Louisiana 71403

Raymond E. Cecil, III, Executive Director

Certified Camp Director

Office (337) 239-6567 Fax (337) 239-9975

[lalions@lionscamp.org](mailto:lalions@lionscamp.org)

<http://www.lionscamp.org>



Dear Staff Applicant:

Thank you for requesting information about positions available in our Summer Camping Program. Our camp is a nonprofit organization sponsored by the Lions Clubs of Louisiana. The primary focus is to provide an outdoor camping experience for the Mentally and Physically Challenged and Diabetic youth of Louisiana.

Our season will begin on Tuesday, June 10 and will end on Saturday, July 26, 2008, which includes a full week of staff training.

Enclosed is an application form, three (3) reference forms, and a work history and information release form.

To apply, you need to:

1. Completely fill out the application, attach a current photo, and return to the address listed above.
2. Have the people who provide a reference for you mail the forms themselves, do not send in your own references.
  - a. Choose adults who have knowledge of your abilities
  - b. Do not use relatives, friends, room mates, etc.
  - c. References are confidential and must be in the camping office before April 1.
3. If you are less than 18 years of age, your parents or guardian must sign your application also.
4. Upon receipt of your completed application and reference forms (all three), your file will be reviewed and you will be notified if chosen for an interview.
5. Follow the instructions in the application and on all other materials as your ability to do so has impact upon your selection as a staff member.
6. Applicants 18 and older will be subject to a criminal background check.

I urge you to send your application as quickly as possible and to follow up on your references. Be sure to follow all instructions and that everything is complete. If you have questions call or send e-mail to the above.

I look forward to hearing from you.

Sincerely  
Louisiana Lions Camp

Raymond E. Cecil, III  
Executive Director









6. To your knowledge, does the applicant have any physical or mental conditions which would limit the ability to carry out an active and strenuous job? \_\_\_\_\_ Yes \_\_\_\_\_ No

Comments: \_\_\_\_\_  
\_\_\_\_\_

7. Please check the statements which best describe this applicant:

- |   |  |
|---|--|
| a. _____ Almost always seems happy                      | l. _____ Finds change difficult              |
| b. _____ Discusses job problems with everyone           | m. _____ Takes initiative                    |
| c. _____ Gets along well with people of all types       | n. _____ Tends to be dictatorial             |
| d. _____ Gets angry easily - loses temper               | o. _____ Has a genuine interest in people    |
| e. _____ Accepts suggestions and corrections graciously | p. _____ Seems to enjoy dissension           |
| f. _____ Seems to be self-centered                      | q. _____ Is often moody and depressed        |
| g. _____ Seems to have self-confidence                  | r. _____ Talks to supervisor about problems  |
| h. _____ Feels that supervisors are unduly critical     | s. _____ Follows through on responsibilities |
| i. _____ Is adaptable to new situations                 |  |
| j. _____ Seems to lack self-confidence                  |  |
| k. _____ Is tolerant of other's ideas and desires       |  |

8. Would you want to have this person be a camp counselor with your children? \_\_\_\_\_ Yes \_\_\_\_\_ No

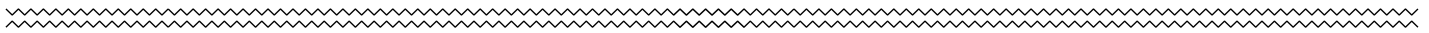
Comments: \_\_\_\_\_  
\_\_\_\_\_

9. How would you rate applicant as a potential camp staff member?

- |                     |                            |
|---------------------|----------------------------|
| _____ Below Average | _____ Above Average        |
| _____ Average       | _____ Exceptionally Strong |

10. Please make any additional comments you think might be helpful to us in determining whether this applicant has the qualifications to work with young children.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



Signature \_\_\_\_\_ Address \_\_\_\_\_

Printed Name \_\_\_\_\_ City \_\_\_\_\_ state \_\_\_\_\_ zip \_\_\_\_\_

Date \_\_\_\_\_ email \_\_\_\_\_ Phone \_\_\_\_\_

**Previous Employment**  
**Please complete starting with most recent**

**Company Name:** \_\_\_\_\_

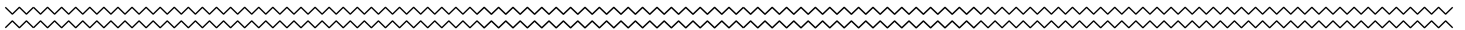
**Supervisors Name:** \_\_\_\_\_

**Phone:** (\_\_\_\_) \_\_\_\_\_

**Address of Company:** \_\_\_\_\_

**Dates Employed: From:** \_\_\_\_\_ **To:** \_\_\_\_\_

**Reason(s) for Leaving:** \_\_\_\_\_



**Company Name:** \_\_\_\_\_

**Supervisors Name:** \_\_\_\_\_

**Phone:** (\_\_\_\_) \_\_\_\_\_

**Address of Company:** \_\_\_\_\_

**Dates Employed: From:** \_\_\_\_\_ **To:** \_\_\_\_\_

**Reason(s) for Leaving:** \_\_\_\_\_



**Company Name:** \_\_\_\_\_

**Supervisors Name:** \_\_\_\_\_

**Phone:** (\_\_\_\_) \_\_\_\_\_

**Address of Company:** \_\_\_\_\_

**Dates Employed: From:** \_\_\_\_\_ **To:** \_\_\_\_\_

**Reason(s) for Leaving:** \_\_\_\_\_