



**THANK YOU FOR TAKING AN INTEREST IN BEING A PART OF THE TOOLS FOR PEACE TEEN CAMP! PLEASE PRINT AND COMPLETE THE FOLLOWING CAMP NURSE APPLICATION.**

*Tools For Peace does not discriminate on the basis of an individual's race, color, national or ethnic origin, religion, age, sex, gender, or sexual orientation.*

Name \_\_\_\_\_ Date \_\_\_\_\_  
 (Last) (First)

**Permanent Address**

Number of years at permanent address: \_\_\_\_\_

Street \_\_\_\_\_

Apt/Box # \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_ Zip \_\_\_\_\_

**School or Business Address until: \_\_\_\_\_ (date)**

Number of years at school or bus. address: \_\_\_\_\_

Street \_\_\_\_\_

Apt/Box # \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_ Zip \_\_\_\_\_

**Current Contact Information**

Phone (\_\_\_\_\_) \_\_\_\_\_

Cell Phone (\_\_\_\_\_) \_\_\_\_\_

Facebook address \_\_\_\_\_

Phone (\_\_\_\_\_) \_\_\_\_\_

E-Mail \_\_\_\_\_

Twitter handle \_\_\_\_\_

School or University \_\_\_\_\_

Major \_\_\_\_\_ Year in School \_\_\_\_\_

<p>Have you ever plead guilty to, or been convicted of, a criminal offense (see below *) <input type="checkbox"/> YES <input type="checkbox"/> NO If yes, give dates and explain:                  (A conviction will not necessarily disqualify you)</p> <p>I understand that any and all continued work with Tools For Peace is dependent upon the results of my driving record, criminal history record, reference checks, and any other documents required that need to be verified. _____ Initial</p> <p><b>* CONVICTIONS:</b> A conviction does not automatically mean you will not be offered the job. What you were convicted of, the circumstances surrounding the conviction and how long ago the conviction occurred are important considerations in determining your eligibility/continued employment. Give all the facts, so that a fair decision can be made. _____ Initial</p>
---

Please check any certifications that will be current throughout the summer:

- |                       |                 |                |                            |         |
|-----------------------|-----------------|----------------|----------------------------|---------|
| ___ Lifeguard         | ___ EMT         | ___ First Aid  | ___ Oxygen Administration  | ___ AED |
| ___ Adult CPR         | ___ Child CPR   | ___ Infant CPR | ___ Swim Lesson Instructor |         |
| ___ CDL (Bus License) | ___ Other _____ |                | ___ Other _____            |         |

**Nursing Experience** PLEASE LIST IN ORDER OF MOST RECENT FIRST

<b>Company Name</b>		Phone Number ( )	Dates of Employment From (Mo/Yr) To (Mo/Yr)	
Company Address (include Street, City, State, Zip Code)				
Job Title-Start	Job Title-Final			
Supervisor (Name & Title)				
Description of Job Duties		Reason for Leaving		
<b>Company Name</b>		Phone Number ( )	Dates of Employment From (Mo/Yr) To (Mo/Yr)	
Company Address (include Street, City, State, Zip Code)				
Job Title-Start	Job Title-Final			
Supervisor (Name & Title)				
Description of Job Duties		Reason for Leaving		

**Other Work or Personal Experience**

Please indicate any additional experience that will support your application for the Camp Nurse position:

1 _____ _____ _____	2 _____ _____ _____
3 _____ _____ _____	4 _____ _____ _____

**Professional / Personal References**

*(Three references required)*

Name	Address	Area Code	Phone Number
1.			
2.			
3.			

**Additional Information**

Please answer the following questions giving careful consideration to each. If extra space is needed, please attach another sheet of paper.

1. How did you learn about TFP Teen Camp?

---

---

---

---

---

2. Why do you want to be a Camp Nurse at TFP Teen Camp? What about the position interested you?

---

---

---

---

---

3. Do you have any prior work related or personal camp experience?

---

---

---

---

---

4. Is there anything else Tools For Peace should know about you and your capabilities? Please provide any further information you would consider valuable to your application.

---

---

---

---

---

*\*\*\*If requested, please be prepared to submit a copy of your most recent employment resume for review with this application.*

5. Describe any special dietary needs (for meal planning purposes) or activity restrictions. Activities will include, sitting, light lifting, and walking in a rustic environment.

---

---

---

---

---

# CODE OF CONDUCT

**The following guidelines are designed to insure that Tools For Peace camp is a happy, safe, and healthy community for everyone. Here are the conditions under which we accept camp nurse participation. Read them carefully. Violation of any of these policies may subject you to immediate dismissal from camp.**

1. The use or possession of alcohol, tobacco, marijuana, or any other controlled substances or drugs is not permitted at camp or on camp trips.
2. Sexual harassment or intimidation, whether verbal or physical, is inappropriate and not permitted at camp.
3. Verbal or physical displays of racial, sexual, or religious discrimination is not permitted at camp.
4. Weapons, fireworks, lighters, matches and any other incendiaries are not permitted at camp.
5. Camper and cabins are private and open to residents of that cabin only. Visitors may visit a cabin other than their own only when a staff member is present and has given permission. Campers may not visit counselor cabins under any circumstances.
6. Theft at camp, or on camp trips, will not be tolerated.
7. TFP Camp will not be responsible for lost or damaged property (phones, cameras, music players, etc.) kept in cabins or other camp buildings.
8. Respect for private property must be observed while at camp.
9. ALL CAMPER MEDICATION (prescription or non-prescription) must be kept in the HEALTH ROOM at all times, with the exception of asthma inhalers or anti-bee sting venom. The camp nurse is responsible for individual exceptions to this rule. Counselors may keep their personal medication, but it is encouraged that medication be kept in the health room.
10. Each member of the camp is expected to contribute to keeping camping facilities properly cleaned and maintained by participating in camp and cabin chores. Graffiti and other forms of vandalism are not tolerated.

Camp Nurse Signature **X** \_\_\_\_\_ Date \_\_\_\_\_

**PLEASE READ CAREFULLY BEFORE SIGNING**

I understand that this application is only valid for the position(s) applied for at present and that Tools for Peace is not obligated to retain or consider this application for future openings.

I have read and understand the foregoing and to the best of my knowledge and belief, the information on this form is true and correct. I understand that falsification of this application in any detail is grounds for disqualification from further consideration of/or for dismissal from working with us.

In the event of my employment, I will comply with all rules and regulations as set forth by Tools for Peace and/or other communications distributed to employees, and understand as a condition of continued work, this will be my compliance with Tools for Peace’s controlled substance abuse and testing policy.

I understand that completion of this form does not guarantee me status as an applicant or any consideration as an employee unless I meet all stated qualifications required.

I understand that Tools for Peace reserves the right to conduct criminal background and reference checks on all applicants being considered for work. I hereby give my permission for Tools for Peace to obtain information relating to my criminal history record. The criminal history record, as received from the reporting agency, may include arrests and convictions. I understand that this information will be used, in part, to determine my eligibility for a position at the Annual Tools for Peace Teen Summer Camp. I understand that I will have an opportunity to review any disqualifying criminal history and that a procedure is available for clarification, if I dispute the record as received.

I have read the above statements and accept the same as a condition of my work with Tools for Peace.

\_\_\_\_\_  
Camp Nurse Signature

\_\_\_\_\_  
Date of Signature

Thank you for your interest in the Tools for Peace Teen Camp. Please return your completed application to the address listed below.

If you have any questions, please email us at [info@toolsforpeace.org](mailto:info@toolsforpeace.org).

Tools for Peace  
Attn: Annual Teen Summer Camp Staff  
75 S. Grand Ave., Suite 217  
Pasadena, CA 91105  
Phone: 626-564-0700, Fax: 626-564-0701  
Website: [www.toolsforpeace.org](http://www.toolsforpeace.org)