

**TENNESSEE FIREFIGHTERS BURN FOUNDATION, INC.**  
**CAMP PHOENIX**  
**COUNSELOR APPLICATION**

Please complete application and return it ASAP.

(Please type or print)

Date \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Name: \_\_\_\_\_  
Last First Middle

Social Security Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ T-Shirt Size (circle) S, M, L, XL, XXXL

Home Address: Street \_\_\_\_\_

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

Phone (area code) \_\_\_\_\_

Email Address: \_\_\_\_\_

Work Address: Employer \_\_\_\_\_

Street \_\_\_\_\_

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

Phone (area code) \_\_\_\_\_

Position \_\_\_\_\_

Date of Birth \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Sex \_\_\_\_\_

Are there any reasons why you could not actively participate in all camp activities or could only partially participate in some of the activities at camp) physical or psychological reasons)?

No \_\_\_\_\_ Yes \_\_\_\_\_ If yes, please describe.

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

**BURN CAMP EXPERIENCE:**

Camp Name: \_\_\_\_\_

Address: \_\_\_\_\_

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

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Years as a counselor \_\_\_\_\_ State your responsibilities: \_\_\_\_\_

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Write a brief biographical sketch including specialized training in camping and experience or training in other fields, which might have a bearing on the position for which, you are applying. Attach an additional sheet if necessary.

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Have you ever been convicted, fined, placed on probation, or imprisoned?

No \_\_\_\_\_ Yes \_\_\_\_\_ (If yes, explain below)

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Have you ever been accused of, arrested for, convicted for, or in any other way involved in an allegation of child abuse?

No \_\_\_\_\_ Yes \_\_\_\_\_ (If yes, explain below)

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**CAMP RELATED AREAS OF KNOWLEDGE, SKILL AND EXPERTISE:**

List recreational activities, hobbies, sports, etc., in which you possess knowledge, skill or expertise that could be used in planning and running camp programs. In the blank after each activity, put (1) if you are certified as an instructor, (2) if you have the skills and experience to assist in teaching, or (3) if you feel you could contribute to the planning or supervision of the activity.

**ACTIVITY**

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

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What contributions do you think you can make at camp?

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What contribution do you think you can make to these children?

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**I understand that it may be necessary to be fingerprinted to be a counselor for and/or criminal background checks to be a counselor at Camp Phoenix. (Initial)\_\_\_\_\_**

This is to certify that I, \_\_\_\_\_, have made application to the Camp Phoenix, and hereby declare that the information provided by me in this application is true, correct, and complete to the best of my knowledge. I understand that any misstatements or omissions of fact shall be considered a cause for dismissal. I also grant the release of any information, which may be helpful to the personnel committee in an investigation of my background.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Return application to:            Doug Pardue  
   386 Martin Chapel Rd  
   Portland TN 37148  
   Phone: 615-323-8516

**TENNESSEE FIREFIGHTERS BURN FOUNDATION, Inc.**  
**CAMP PHOENIX**  
**RECOMMENDATION FOR BURN CAMP COUNSELOR**

\_\_\_\_\_ has applied for a counselor position at Camp Phoenix.

The applicant has given your name as a reference and your assistance in correctly evaluating his or her experience record in the areas listed below will be appreciated. This information will be of the greatest help to the applicant if returned immediately in the enclosed self-addresses envelope. Information given will be considered confidential.

Please make an evaluative statement in each of the areas listed below, as well as answer the questions following and any additional comments you feel would be helpful.

In what capacity and for what length of time have you known the applicant? \_\_\_\_\_

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**EVALUATION**

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**PERSONAL APPEARANCE**

Neatness in grooming, etc.

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**PHYSICAL HEALTH**

Posture, energy, endurance, disabilities or handicaps, etc.

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**EMOTIONAL HEALTH**

Adjustment, objectivity, emotional maturity, tolerance, Stability, common sense, etc.

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**PERSONALITY**

Poise, tact, adaptability, cooperation, interests, etc.

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**INTELLIGENCE**

Alertness, ability to accept responsibility, etc.

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**TECHNICAL SKILLS**

Ability to teach, group leadership, supervisory skills, etc.

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**FLEXIBILITY**

Ability to cope with new situations, etc.

Would you recommend this applicant for a position working around children? (Why or why not?)

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**ADDITIONAL COMMENTS:**

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Signature: \_\_\_\_\_

Date \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Write or Type Name: \_\_\_\_\_

Phone: \_\_\_\_\_

Return recommendation to: **Doug Pardue**  
**386 Martin Chapel Rd**  
**Portland TN 37148**  
**Phone: 615-323-8516 Home**