

The Drama-Play Connection, Inc.
298 Crescent Street
Waltham, MA 02453



Volunteer/Internship
APPLICATION

Today's Date _____

1. PERSONAL INFORMATION

Name _____ Soc. Sec. No. _____

Present Address _____

Phone (_____) _____ Cell (_____) _____

Email address _____

Permanent Address _____

Phone (_____) _____ Fax (_____) _____

Parents' Address _____

Phone (_____) _____ Fax (_____) _____

Date of Birth _____ Place of Birth _____ Marital Status _____

Allergies: Foods _____ Medications _____

Other _____

Medical limitations or Restrictions _____

Dietary Restrictions _____ Vegetarian _____

Health Insurance Company _____ Policy # _____

Staff T-Shirt Size: S M L XL XXL - Optional to answer until we have to order t-shirts.

Emergency Contact _____

_____ Phone (_____) _____

Please describe internship requirements for your institution: _____

2. EDUCATION AND EXPERIENCE

College or School	Degree Sought/Earned	Date of Degree/ Graduation	Major Area

Professional, Social, or Honor Society Memberships _____

Extracurricular Activities _____

Please list college courses in the following disciplines:

Psychology	Education	Art/Drama	Related Technology	Speech

Position desired: Lead Counselor Counselor Media Coordinator

Previous Experience: Where? Dates: _____

Staff: Where? Dates: _____

If you have counseling or media related experience, please list positions and responsibilities: _____

Please list any training or experience with children or children with special needs _____

Hobbies and Musical Instruments played _____

3. PROGRAM AREAS: Evaluate your skills in organizing and teaching in the following camp activities according to the scale:

1= NONE, 2 = SOME, 3 = MUCH.

_____ Social Pragmatics	_____ Drama	_____ Arts and Crafts
_____ Film Editing	_____ Web Design	_____ Photography
_____ Outdoor Games	_____ Swimming	_____ Other _____

Swimming

Check appropriate areas:

_____ Non-swimmer	_____ Water Safety Instructor
_____ Average Swimmer	_____ Basic Rescue and Water Safety
_____ Strong Swimmer	_____ Advanced Life Safety

Safety

Check appropriate areas:

_____ CPR Training
_____ First Aid Training
_____ Other

4. GENERAL INFORMATION AND REFERENCES

How did you hear about The Drama-Play Connection? _____

What contributions do you think you can make to camp? _____

What age group would you prefer to work with? _____

Do you have a driver's license? _____

Please PRINT the names and addresses of three references who can evaluate you either professionally or personally. No relative or personal friends.

1. _____
Name Relationship Phone number

Street Address

2. _____
Name Relationship Phone number

Street Address

3. _____
Name Relationship Phone number

Street Address

Because of the nature of our children, The Drama-Play Connection is a highly structured and organized environment. Staff members are expected to perform and function in accordance with the structure, regulations, policies and programs outlined in the enclosed brochure and materials. Please review these carefully. Thank you for your inquiry.

Please Return To:
The Drama-Play Connection
298 Crescent Street
Waltham, MA 02453

IT IS REQUIRED BY LAW THAT ALL INDIVIDUALS WORKING IN A PUBLIC FACILITY FOR CHILDREN READ AND RESPOND TO THE FOLLOWING DISCLOSURE.

In consideration of employment or continued employment, the Counselor or undersigned employee agrees to disclose the following:

1. Have you ever been questioned by police, campus police, or any other law enforcement agent or officer regarding a criminal charge?
 Yes No

2. Have you ever been arrested, convicted, or brought to court for any criminal charge, including sex-related or child-abuse related offenses?
 Yes No

3. Have you ever been notified by any child Welfare Agency that you were the subject of a suspected child abuse report?
 Yes No

The undersigned further agrees that:

1. Possession of or use of non-medically prescribed drugs or alcoholic beverage on camp grounds, or returning to camp under the influence of drugs or alcohol shall be reason for immediate dismissal.
2. Physically abusing, indecent touching or exposure of or to a camper shall be reason for immediate dismissal.

It is also asked that employee shall keep the Director informed of any offenses, convictions or arrests subsequent to the signing of this disclosure.

The employee warrants that the age, schooling, degrees and all other statements included in the application papers are true. Any misrepresentation shall give the camp the right to cancel the contract.

The employee understands that it is required by law that the camp complete a Criminal Offender Record Information (CORI) on all employees and volunteers who have any contact with minors.

It is hereby agreed that any and all rules, regulations and policies of the camp and any special clauses attached hereto are made part of this contract.

Employee Signature

Date

Social Security or ID Number