**St. Paul’s Presbyterian Church Summer Program Director Application**

**INFORMATION**

|  |  |  |  |
| --- | --- | --- | --- |
| First Name: | | Last Name: | |
| Address: | | | |
| Home Phone:  Cell Phone: | | Email: | |
|  | Date of Birth: |  | Male ( )  Female ( ) |
| Emergency Contact: | | Phone: | Relationship to you: |
| Were you a full-time student in the 2014-2015 school year?  Yes ( ) No ( ) School: | | Do you intend to attend school full-time in the 2015-2016 school year?  Yes ( ) No ( ) School: | |
| Highest grade/ diploma/ degree completed by  July 1, 2015? | | Program (if applicable): | |

**WORK/VOLUNTEER EXPERIENCE**

|  |  |  |  |
| --- | --- | --- | --- |
| Employer | Position | Type of Work | Dates |
| 1. |  |  |  |
| 2. |  |  |  |
| 3. |  |  |  |
| 4. |  |  |  |

**CHRISTIAN EXPERIENCE**

|  |  |  |
| --- | --- | --- |
| Home Church: | Are You a Member?  Yes ( ) No ( ) | Minister’s Name: |
| In what ways are you presently involved in your church? | | |

**LEADERSHIP AND SPECIAL QUALIFICATIONS**

|  |  |  |
| --- | --- | --- |
| Please detail the areas that you have significant experience and/or qualifications in. Examples: First Aid Qualifications, NLS, music, second language, ECE certificate, Food Safe, RCABC Qualifications, Trade ticket, Leadership Training, specific college/university courses/training, coaching, etc. Please scan/photocopy documentation of your certifications and attach them to your application. | | |
| Experience/Qualification | Description | Expiry Date  (if applicable) |
| 1. |  |  |
| 2. |  |  |
| 3. |  |  |
| 4. |  |  |

**QUESTIONS**

Please take time to carefully and thoughtfully answer the following questions about yourself, your faith, and your work experience.

1. What does being a Christian mean to you?

2. What do you love about working with children? What do you find challenging about working with children?

3. Describe a significant learning experience you have had in the past. What did you learn and how did that change your outlook on life?

4. Sell yourself – what makes **YOU** an ideal candidate for working as a summer program director at St. Paul’s Church?

**REFERENCES**

|  |  |
| --- | --- |
| Name: | Phone Number: |
| Relationship to You/Position: | |

|  |  |
| --- | --- |
| Name: | Phone Number: |
| Relationship to You/Position: | |

|  |  |
| --- | --- |
| Name: | Phone Number: |
| Relationship to You/Position: | |

Below you will find a reference form. You will need this form filled in by at least two of the following: minister, youth leader, past employer, supervisor, teacher, or a coach. All referees must be 21 or older.

Please return your completed application along with resume and cover letter to:

St. Paul’s Presbyterian Church

8469 Cedar St.

Mission, BC

V4S 1A1

Or Email directly to [rev.rebecca.simpson@gmail.com](mailto:rev.rebecca.simpson@gmail.com)

Call Rev. Rebecca with any questions you might have: 604-226-8584

**REFERENCE FORM**

St. Paul’s Presbyterian Church, 8469 Cedar St, Mission, BC, V4S 1A1

[rev.rebecca.simpson@gmail.com](mailto:rev.rebecca.simpson@gmail.com)

604-226-8584

**Please complete in full and return either by mail or electronically to the above addresses directly. Forms are due by June 15, 2015.**

**Thank you for taking the time to help us assess this person’s qualifications. The individual who passed this form on to you has applied to work at St. Paul’s Presbyterian Church this summer. Please feel free to include any additional remarks that would aid us in better understanding this individual. Thank you!**

|  |  |
| --- | --- |
| Name of Applicant: | How long have you known them? |
| In what capacity? | |

How would you assess the applicant?

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Area | Excellent | Good | Fair | Needs  Improvement | N/A | Comments |
| Reliability |  |  |  |  |  |  |
| Social Skills |  |  |  |  |  |  |
| Initiative |  |  |  |  |  |  |
| Judgement |  |  |  |  |  |  |
| Work Ethic |  |  |  |  |  |  |
| Emotional stability |  |  |  |  |  |  |
| Reaction to criticism |  |  |  |  |  |  |
| Attitude |  |  |  |  |  |  |
| Consideration of Others |  |  |  |  |  |  |
| Ability to work independently |  |  |  |  |  |  |

If you are able to address this, and are comfortable doing so, please tell us about the applicant’s ability to communicate regarding his/her Christian faith:

Do you feel the applicant has leadership ability and/or potential?

Do you have any specific comments or concerns?

Overall Recommendation (circle one):

|  |  |  |  |
| --- | --- | --- | --- |
| Highly Recommend | Recommend | Recommend with reservations | Do not recommend |

|  |  |
| --- | --- |
| Name: | Phone Number: |
| Signature: | Date: |

*Thank you for your evaluation. If you would like to discuss your reference please contact the Minister, Rebecca Simpson, at 604-226-8584.*