

2024 MONTVALE RECREATION SUMMER CAMP **APPLICATION FOR *GROUP LEADER***

Montvale Recreation Summer and Adventure Camps are seeking energetic, patient, friendly, fun, and responsible individuals for Group Leader positions. A group leader's role at camp is to help campers and counselors adjust to camp and to each other with an emphasis in self-respect, respect for others, promotion of positivity, healthy friendships, and the establishment of strong camp partnerships. Group Leaders are also expected to oversee the safety and well-being of all campers in their group throughout the day. All Group Leaders must be 18 years or older and be able to work all 18 days of camp along with attending the counselor training. Camp or teaching experience preferred, but not required. Salary Stipend: Summer Camp- \$1500 Adventure Camp- \$1600

RETURN BEFORE MARCH 1 BY MAILING OR EMAILING TO: Montvale Borough Hall, ATTN: Recreation Department, 12 DePiero Drive, Montvale, NJ 07645 or email MontvaleRecreation@montvaleboro.org

APPLICANTS MUST BE AVAILABLE DURING THE BELOW CAMP DATES AND COUNSELOR TRAINING:

Monday-Friday

June 24 - July 19 (Off July 4 & 5)

Summer Camp Counselor Hours: 9:00am-2:45pm

Adventure Camp (Trips Camp) Counselor Hours: 8:30am-2:45pm

Mandatory Counselor Training: June 21

All NEW applicants must be interviewed. Please make sure that your email and phone number are **neatly** written on the application. A camp director will be contacting you to set up the interview.

Summer Camp Directors

Mrs. Loranger



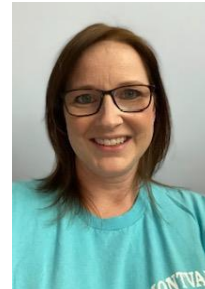
Mr. Kevin



Mr. LoPresti



Mrs. LoPresti



Adventure Camp Directors

Mrs. Carlisle Mrs. Daniel



APPLICANTS MUST FULLY COMPLETE THE BELOW APPLICATION THEMSELVES. APPLICATIONS THAT ARE FILLED OUT BY ANYONE OTHER THAN THE APPLICANT WILL NOT BE CONSIDERED.

GROUP LEADER APPLICATION

Name: _____ Date: _____

Email: _____ Birthdate: _____
(month/day/year)

Address: _____
(House Number & Street) (Town) (State, Zip)

Cellphone Number _____

Emergency Contact Name: _____

Phone number: _____ Relationship to Applicant: _____

Will you be able to work Monday-Friday 6/24/24-7/19/24 (Off July 4 & 5) and the mandatory training on June 21? YES NO

Highest Level of Education Completed: _____

Camp or Related Experience & Other Employment (list most recent employment first)

Date	Camp or Company	Duration	Experience

References (Do not list relatives or those listed on this application)

Name	Phone	Relationship

Certifications

Type	Organization	Exp. Date

Questionnaire

1. What, in your opinion, are your top three skills, you possess that will prove to be an asset to the position you are applying for?

2. Write a brief summary of past camp experience and/or training which will help make you an effective staff member.

3. What character qualities do you possess that would be useful as a Group Leader?

4. How would you expect a camper to benefit from an experience in your group?

5. State qualities you possess that would ensure a positive working relationship with other staff members.

6. Which age group do you prefer to work with? (Rank 1-4 with 1 being your first preference)*

____ 1st-2nd Graders

____ 5th Graders

____ 3rd-4th Graders

____ 6th-7th Graders (Adventure Camp: Trips)

*Preference does not guarantee placement in that age group.

I (applicant) certify that the information in this application is correct and completed only by the applicant themselves. By signing the below, I also acknowledge that I will adhere to/implement all camp standards and procedures to the best of my ability for the duration of my involvement in camp.

Signature of Applicant _____

Date _____