

C a m p S k y l a r k Children's Bereavement Camp

VOLUNTEER APPLICATION FORM

P O S I T I O N D E S C R I P T I O N

- Children's Bereavement Camp Volunteer

R e q u i r e m e n t s :

Enjoys working with children, possesses active listening skills, respect for personal boundaries and diverse beliefs. Has the ability to assess the need for intervention, consultation, information and guidance.

Q u a l i f i c a t i o n s :

- Completion of Camp Skylark Volunteer training program and on-site camp orientation.
- Must have understanding of supporting grief and loss specific to children
- Complete a successful interview with Camp Skylark Coordinator and acceptance to volunteer
- must be 18 years of age or older
- has passed British Columbia criminal record check
- has an understanding and acceptance of;
- sexual/physical abuse prevention policy and
- confidentiality policy
- has provided two personal references

* Please note that our volunteer training covers all areas listed above. We value volunteers who come from all walks of life, both professional and non-professional. Formal education in children's grief is not essential, but experience with children, understanding, compassion and caring attributes are essential for all Camp Skylark volunteers.

A c c o u n t a b l e t o :

- Camp Skylark Director and Hospice Coordinator

R e s p o n s i b i l i t i e s :

- Provide emotional support to campers
- Work with a good understanding of children's grief issues and share grief education with the children
- Communicate to the camp director any concerns you have about a camper's well-being
- Participate in and assist in scheduled activities with the campers (including hiking, swimming, games, group activity, arts & crafts etc.)
- Work with the camp director to insure the safety of the campers. This includes orientation for safety around wildlife.

- Volunteers will work within guidelines for camper's personal safety and for integrity of the camp program. Volunteers and campers will be supervised in a manner that requires that children are not alone, either with their peers or with adults.
- Help setting up camp facility, activity areas and help clean up area after use
- Provide relief for activity supervision as requested by camp coordinator or committee
- Arrive at camp prepared to greet campers assigned to your group. You will receive information about campers assigned to your group prior to the camping weekend.
- Provide reports of camper's behaviours, expressed concerns, grief issues, and level of comfort in the camp setting and at the end of camp regarding the quality of engagement for campers
- Attend meals and activities with your camping group
- Provide overnight supervision for your camping group and general supervision for the larger camping group
- Assist in behavior or grief issue interventions as required.
- Other relevant tasks and assignments as required
- Provide feedback and evaluation to Camp Skylark Committee in order to improve future camp ventures.

Staff & Volunteer Guidelines

1. No alcohol or non-prescription drugs will be permitted
2. No radios, tape/CD players/MP3 players, I Pods, or electronic games permitted except in the course of a structured activity where it is required.
3. Each set of volunteer counselors will have approximately 4-5 campers assigned to them; to their sleeping area, for meals and for activities. Extra supervision volunteers may be required to sleep in cabins or dormitory with a group if necessary.
4. Campers and volunteers will be required to tidy their sleeping rooms or cabins and insure that belongings are stored in a safe and secure manner.
5. Campers and volunteers will not be permitted to enter cabins or sleeping areas other than their own
6. No food or valuables should be left in the sleeping rooms or cabins. Snacks will be provided and leftover food will be stored or disposed of properly to insure safety from insects or wildlife.
7. All injuries must be reported to the camp nurse and an incident report filled out.
8. Contact information will not be shared between campers and volunteer/staff. They will have an opportunity to reunite at follow-up gathering to be scheduled after camp closure.
9. Campers may not go off alone from a scheduled activity. Volunteers will request assistance if a camper is requesting to leave an activity area.

VOLUNTEER APPLICATION FORM

Thank you for your interest in becoming a Camp Skylark volunteer. The information you provide will help us to know you and find the best way to utilize your abilities.

Name _____

Address _____

Street city prov postal code

Phone (h) (w) (c) _____

E-mail _____

Age: (must be over 18) _____

Education:

High School yes no

College yes no

Student: program _____

level attained _____

Education, training/workshops/courses relevant to children's camps, to childcare or education, or to grief and loss support:

Employment history:

Employer _____

Position _____ For _____ years

Briefly describe the type of work you do: _____

Past employers:

1) _____ Position _____

2) _____ Position _____

Volunteer Experience:

Please list other volunteer work you have done:

Business or organization:

_____ Duties _____

_____ Duties _____

_____ Duties _____

Why do you want to volunteer at Camp Skylark?

Your areas of interest:

- camp counselor arts & crafts recreation supervision
bereavement other (please specify)

FIRST AID TRAINING -	I HAVE <input type="checkbox"/>	I DO NOT HAVE <input type="checkbox"/>
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Personal References:

Please provide two personal references. By signing below you are authorizing us to contact these references.

1) Name

Address

Phone (h)

(w)

(c)

Relationship

Years known

2) Name

Address

Phone (h)

(w)

(c)

Relationship

Years known

Please consider my application towards volunteer opportunities at Camp Skylark this year.

Name

Signature

Date

E m e r g e n c y C o n t a c t I n f o

Name

Address

Phone

Relationship

Doctor

MSP#

Allergies / Medications
