

Counselor Application Children's Camp Pastoral Recommendation

PASTORS,

Please complete the ENTIRE portion of this application. This will be kept in strictest confidence. Texas State Law requires us to have a recommendation and a background check for each counselor and staff member on file. If you have a person applying that you do not recommend, it is the responsibility of the church to make sure that person is informed. Any person that is not recommended by their pastor will be referred back to their church. WTX Children's Camp is not a spiritual training time for adults or teens, but is a week of dedicated Christian workers training our children. If you feel there is nothing to explain, you may leave that blank. Please consider this application seriously and prayerfully. THANK YOU!

Applicant Name (print first and last name) _____ Church _____

Does applicant attend church regularly & are they an active member of your church? Yes _____ No _____ Explain _____

How long has applicant been an active member of your church? _____

Do you know what their family life is like? Have you seen any concerns that might involve sexual or physical abuse? _____

What experience does the applicant have in working with the children of your church? (please explain) _____

Does the applicant relate well to children? (please explain) _____

Does the applicant have any habits that would be undesirable at a Christian Children's Camp such as smoking, tobacco, e-cigarettes, vaping, alcohol, or anything else? (If so, please explain) _____

Do you have any red flags considering this applicant for the position of counselor, Jr. counselor, crew member, or staff at Children's Camp?

Yes _____ No _____

Explain _____

Does the applicant have the physical capabilities to keep up with the children during all of the strenuous activities of camp such as hiking, climbing, swimming, river rafting, etc.? _____ Yes _____ No Explain _____

DO YOU AS A PASTOR RECOMMEND THE APPLICANT FOR THIS POSITION AS CHRISTIAN CHILDREN'S CAMP COUNSELOR?

Yes _____ No _____

Please write a brief summary explaining why you do or do not recommend the applicant for this position: _____

Pastor's Signature _____

Date _____

Thank you for your time and careful consideration of this applicant. The quality of counselors is extremely important and we greatly appreciate your help in this matter.

Please mail applications to:

Renae Fowler
401 Brasenose St.
Crowley, TX, 76036

HOME PHONE: (817) 939-3960