



JUNIOR AND TEEN CAMP (from 7 to 16 years)

Staff Application

Application for: July session August session (Mark your preferences)

1. General Information

Name: First Name:
Address: Postal Code :
City: Country:
Nationality: Social Security # / AVS:
Phone: Fax:
E-Mail: Date of birth: (DD/MM/YY).....
Religious or ideological affiliation:.....
General health: Height (cm): Weight (kg):.....
Driving license: Yes No International driving license: Yes No
Category: Standard Automatic drive only
Date the license was obtained: May drive vehicles of 15 persons or more Yes No
Smoker: Yes No Marital status:
Vegetarian: Yes No (no special meals will be provided)
Mother tongue:
Knowledge of other languages: Level:
1. Basic Intermediate Advanced
2. Basic Intermediate Advanced
3. Basic Intermediate Advanced
4. Basic Intermediate Advanced

2. Educational Information

University / Faculty: Year:
1.
2.
3.

Diplomas obtained: Year:
1.
2.
3.

Other studies:.....
Other degrees obtained:
.....

(Please provide photocopy) Teaching experience: Yes No

Specify organization:

Position: Age of pupils:

3. Sports, Arts & Crafts and other Capabilities

Please mark in the table below as follows:

XXX expert, **XX** can teach, **X** can assist

Sports

Arts & Crafts, Performing Arts etc.

Tennis		Drawing	
Squash		Painting	
Badminton		Ballet	
Martial Arts		Folkdance	
Uni-Hockey (street hockey)		Jazz dance	
Foot / Soccer		Hip Hop	
Basketball		Theatre	
Volleyball		Filming / Video	
Sailing		Circus	
Windsurfing		Photography	
Hiking		Bracelets	
Rock Climbing		Decorating	
Golf (handicap)		Modelling	
Athletics			
Gymnastics		Paperwork, Woodwork, Origami	
Yoga		Cooking / Baking	
Cycling - Mountain Biking		Music	
Horseback Riding		Other:	
Skiing		
Snowboarding		
Swimming		
Ice-skating		
In-line skating / Roller-skating			
Field hockey		Club memberships	
Others:		Membership in youth	
.....		organizations:	
.....		

Do you play a musical instrument? Yes No

Specify:

Can you teach music? Yes No

Musical studies?

4. References

(Pls. provide the name of 2 persons whom we may contact, incl. their position, and/or relationship)

.....
.....

5. Organizational

At camp I am able to teach: French English German Spanish

6. How or from whom did you learn about JUNIOR AND TEEN CAMP ? (or IJC/ITC)

.....

(If you were referred by someone, please include the name)

I confirm, that the above information is correct:

Place / Date Signature

Please send by e-mail including photo to: Rose-Marie and Bernard Repond, CH-1633 Marsens, Switzerland, or Fax to + 41 26 915 05 09, or scan and e-mail to: mail@jtcamp.ch