

# Kanuga

CONFERENCES, INC.

AN EPISCOPAL CENTER  
Post Office Box 250  
Hendersonville, NC 28793-0250  
Telephone 828/692-9136 Fax 828/696-3589  
e-mail: info@kanuga.org www.kanuga.org



Please type or print with an ink pen. Attach a recent photo (optional).

### VITAL INFORMATION

Full Name \_\_\_\_\_ Preferred \_\_\_\_\_

Social Security # \_\_\_\_\_ Gender \_\_\_\_\_ Birth date (optional) \_\_\_\_\_

Present Address \_\_\_\_\_

City, State, ZIP \_\_\_\_\_

Daytime Phone (\_\_\_\_\_) \_\_\_\_\_ Cell (\_\_\_\_\_) \_\_\_\_\_

Email \_\_\_\_\_

Permanent Address \_\_\_\_\_

City, State, ZIP \_\_\_\_\_

Phone (\_\_\_\_\_) \_\_\_\_\_

Are you a United States citizen?  Yes  No If no, are you legally entitled to work in the U.S.?  Yes  No

Earliest date you can start work: \_\_\_\_\_ Latest date you must end work: \_\_\_\_\_

Do you have any schedule conflicts that might prevent you from being at Kanuga for the entirety of your contract?

Yes  No If yes, please explain: \_\_\_\_\_

For what positions are you applying? List in order of preference: (See positions list)

1. \_\_\_\_\_ 2. \_\_\_\_\_

3. \_\_\_\_\_ 4. \_\_\_\_\_

Will you be willing to work in any position that you are assigned?  Yes  No

Have you ever been convicted of any crime other than a minor traffic violation?  Yes  No

If yes, please explain: \_\_\_\_\_

\_\_\_\_\_

Note: A conviction may not automatically disqualify the applicant from employment.

### GENERAL INFORMATION

Religion/Denomination: \_\_\_\_\_

How did you learn of Kanuga? \_\_\_\_\_

List Certifications & Training (Lifeguard, WSI, CPR, First Aid, WFR, WRA, belay trained, etc.): \_\_\_\_\_

\_\_\_\_\_

List any other experience, talents, or skills that you feel are applicable to the job for which you are applying: \_\_\_\_\_

\_\_\_\_\_



**EDUCATION**

College/University Name and Location	Dates Attended	Field of Study/Graduation Status
College/University Name and Location	Dates Attended	Field of Study/Graduation Status
High School Name and Location	Dates Attended	Graduation Status

**EMPLOYMENT HISTORY**

List three employers, starting with the most recent.

Company Name and Address	Position and Duties	Dates of Employment	Immediate Supervisor's Name & Telephone Number
Company Name and Address	Position and Duties	Dates of Employment	Immediate Supervisor's Name & Telephone Number
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May we contact your employers?  Yes  No

**HEALTH INFORMATION**

A completed health statement is required of all staff when reporting to work. Do you have any physical, mental or emotional problems that might interfere with your ability to perform the position for which you are applying?

Yes  No If yes, please describe: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_

Telephone H: (\_\_\_\_\_) \_\_\_\_\_

Telephone W: (\_\_\_\_\_) \_\_\_\_\_

Telephone C: (\_\_\_\_\_) \_\_\_\_\_



**ESSAY**

Kanuga's Statement of Purpose

"Kanuga's purpose is to provide for God's people in this broken world a glimpse of the Kingdom through hearing the Gospel, experiencing Christian community and being empowered for strength, growth, and service in both our individual communities and in the rest of God's creation."

**Applicants to Kanuga's Summer Staff.** Knowing Kanuga's Purpose and the position(s) you are applying for, tell us (in approximately 200 words) what attributes, experience, knowledge, and skills you possess that would make you a great addition to the Kanuga Community.

**REFERENCES**

Kanuga requests that you supply three references from individuals who can speak about your qualifications, trainings, and background. You can download Kanuga's summer staff reference form in the employment section of [www.kanuga.org/aboutus/employment/summerstaff](http://www.kanuga.org/aboutus/employment/summerstaff). Please pick references such as teachers, employers, supervisors, and ministers. You may supply one personal reference, such as a neighbor or family friend, if you feel they can speak candidly about your qualifications. Please do not list relatives as references. Be sure to provide each of your references with a stamped envelope addressed to Chip Redfern, care of Kanuga Conferences, Inc., or fax to (828) 696-3589.

Name	Position	Mailing Address	Telephone Number
Name	Position	Mailing Address	Telephone Number
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**COMMITMENT OF APPLICANT**

I fully understand that Kanuga has certain standards of conduct and appearance as spelled out in the attached information sheet. If my application is accepted, I can be depended upon for my cooperation in maintaining those standards. I further understand the importance of remaining at Kanuga and fulfilling my obligations until the expiration date of my agreement or contract.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Parent/Guardian Signature (if under 18) \_\_\_\_\_ Date \_\_\_\_\_

**THANK YOU FOR APPLYING TO BE PART OF THE KANUGA STAFF**



## APPLICANT BACKGROUND INFORMATION

Protective Services Check - Criminal Records - Motor Vehicle Check – Credit Check

Full Name (First, Middle, Last): \_\_\_\_\_

Birth date \_\_\_\_\_ Social Security # \_\_\_\_\_

Alias (if applicable): \_\_\_\_\_

Driver's License # \_\_\_\_\_ State or issuing jurisdiction \_\_\_\_\_

Please list location of school and home residences for the past 10 years (current & most recent first).

Address, City, State, Zip Code	County	Area Code	Dates of Residence

1) Have you ever been convicted or charged with a crime related to attempted or actual misconduct with a child including but not limited to sexual abuse, child abuse, sexual exploitation, and child neglect? Y or N

If yes, please explain:

2) Have you ever been convicted or charged with a violent crime against children or adults including but not limited to rape, assault and battery, kidnapping, or intent to commit these crimes? Y or N

If yes, please explain:

3) Have you ever been held liable in a civil case regarding the above mentioned crimes? Y or N

If yes, please explain:

4) Have you ever been terminated from a job for, arrested for or convicted of a crime related to illegal drug use or involvement in illegal drug related activities? Y or N

If yes, please explain:

I hereby authorize the agency chosen by Kanuga Conferences, Inc. to provide the requested information. I understand that Kanuga Conferences, Inc. has a practice of requesting a background check, which could include protective services check/criminal records/motor vehicle check/ credit check on prospective staff members prior to contract confirmation. I hereby grant permission and authorize the above-mentioned checks and give permission to allow verification of any information given on my application. I understand that failure to provide accurate information may result in nullification of offer or termination. I also understand that Kanuga Conferences, Inc. may deny/terminate employment if I answered "yes" to any of the four questions I was asked on this form or if Kanuga discovers any information that may imply a "yes" to any of the questions. I understand that the information obtained will become part of my employment application.

Staff Member/Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian Signature (if under 18): \_\_\_\_\_ Date: \_\_\_\_\_

*Kanuga Office Use:*

Date application received: \_\_\_\_\_ Reference forms received: 1 \_\_\_\_\_ 2 \_\_\_\_\_ 3 \_\_\_\_\_

Date correspondence sent: \_\_\_\_\_ Telephone and/or personal interview: date \_\_\_\_\_

Essay attached: yes \_\_\_\_\_ no \_\_\_\_\_ Comments: \_\_\_\_\_