

Pacific Northwest Camp & Cedar Springs Nurse Application

July 28 – August 4, 2012

(Please Print and Provide All Information Requested; Completed application (pages 1-7 and references) due no later than 5/14/12)

All nursing staff desiring to serve as volunteers with Pacific Northwest Camp & Cedar Springs Camp are required to complete this application. Thank you for your interest and for taking the time to complete this application.

Full Name: _____ Phone: (____) _____

Preferred Name: _____

Address: _____ Email: _____

City: _____ State: _____ Zip: _____

How Long at current address: _____ If less than 10 years, please include previous addresses/address.

_____ street _____ city _____ state _____ how long

_____ street _____ city _____ state _____ how long
Marital Status: Single Married Divorced Separated Date of birth (MM/DD/YY): _____

Employer: _____ Your position: _____

Shirt Size: Small Medium Large X Large XX Large Other _____

NURSING QUALIFICATIONS

License Number: _____ Circle: LPN RN NR LVN

Current Certifications (CPR, PALS, ACLS): _____

Hospitals or medical facilities where you have worked:

Name _____ City, State: _____

Name _____ City, State: _____

Have you any experience caring for children? If so, describe and list the name of the institutions, age of the children, and type of care.

Institution _____ Children _____

Type of care _____

Have you had any experience in emergency care? Describe. _____

Have you worked at a camp facility as a nurse? Yes No
(If yes, please provide the following information.) Year: _____

Name of Organization: _____ Location of Camp: _____

MINISTRY EXPERIENCE

Church you attend: _____ Pastor's name: _____

Address: _____ Phone: (____) _____

City: _____ State: _____ Zip: _____

Yes No Are you a regular attendee? How long attended: _____

Yes No Have you ever been asked to leave a church or your service as a volunteer, employee or other?

If yes, explain: _____

Name of church where you serve in Awana: _____

PASTORAL OR CHURCH REPRESENTATIVE REFERENCE (non-family member)

Name: _____ Email: _____

Address: _____ Phone: _____

City: _____ State/Zip: _____

Relationship: _____

COMMANDER REFERENCE (non-family member)

Name: _____ Email: _____

Address: _____ Phone: _____

City: _____ State/Zip: _____

Relationship: _____

PROFESSIONAL REFERENCE (non-family member)

Name: _____ Email: _____

Address: _____ Phone: _____

City: _____ State/Zip: _____

Relationship: _____

PAST & CURRENT AWANA CLUB EXPERIENCE - In which "Club(s)" have you served, for how many years, what capacity(ies)?

CLUB	YEARS SERVED	WHAT CAPACITY? (Commander, Director, Leader, etc.)
Overall Club <input type="checkbox"/> Served in Past <input type="checkbox"/> Currently Serving		
Puggles <input type="checkbox"/> Served in Past <input type="checkbox"/> Currently Serving		
Cubbies <input type="checkbox"/> Served in Past <input type="checkbox"/> Currently Serving		
Sparks <input type="checkbox"/> Served in Past <input type="checkbox"/> Currently Serving		
T&T <input type="checkbox"/> Served in Past <input type="checkbox"/> Currently Serving		
Trek <input type="checkbox"/> Served in Past <input type="checkbox"/> Currently Serving		
Journey <input type="checkbox"/> Served in Past <input type="checkbox"/> Currently Serving		

PERSONAL LIFESTYLE

Yes No Is there anything in your past experience or background that might affect your service at the Camp?
(This information will be kept confidential and will only be used to help us know how to best support you if you are selected to work at camp)

Yes No Do you currently use tobacco, alcohol, drugs, etc.?

Yes No Do you have any physical impairment that might limit or restrict your ability to serve in the Camp environment?

Yes No Do you struggle with pornography, or any sexual addiction/identification issues?

If yes on any of the above, please explain: _____

CHRISTIAN WALK

Yes No Have you trusted Jesus Christ as your Personal Savior?

Summarize how you came to know Jesus Christ as your Savior: _____

What things do you do on a regular basis to keep yourself spiritually fresh and to ensure that you "walk your talk"?

Briefly explain (outline) the gospel as you would share it with a child/teen. List applicable scriptures. Consider scripture verses that God used to convict you of your sin and need for a Savior, to reveal His provision of a Savior and how you know you are saved for all of eternity.

PRIOR CAMP EXPERIENCE (Non-nursing experience)

All applicants must provide information on any prior camp experience, beginning with the most recent experience (enter number of years served in the appropriate blanks)

1. Name of Organization: _____ Location of Camp: _____

Camper Staff Counselor Music Teacher Etc. _____

2. Name of Organization: _____ Location of Camp: _____

Camper Staff Counselor Music Teacher Etc. _____

OTHER:

If accepted, I agree to wholeheartedly enter in to the spirit of the camp and to participate in the total camp program. I understand that I am responsible to the camp administration and agree to cooperate with fellow workers.

Yes No I have read and agree with the Doctrinal Statement.

Yes No I have read and understand the Child Protection Policy and will uphold the standards therein. I understand that I must attend camp training which includes review of the child protection policies prior to serving.

Yes No I have read and agree to abide with the Cedar Springs Camp rules.

Please explain "yes" answers to the following questions more fully on a separate piece of paper.

1. Are there any facts or circumstances involving you or your background that would call into question your involvement in an environment where children or youth may be present?
Yes _____ No _____ Answering yes will not necessarily bar you from volunteering.
2. Have you ever been held, detained, taken into custody, charged, arrested, indicted, fined, forfeited bond, cited, or convicted for a violation of any law, regulation, or ordinance?
Yes _____ No _____ Answering yes will not necessarily bar you from volunteering.
3. Are you currently under indictment, on probation, parole, or work release?
Yes _____ No _____ Answering yes will not necessarily bar you from volunteering.
4. Have you ever been investigated by the Department of Social and Health Services, including, but not limited to, Child Protective Services, or a similar department or agency in any state or jurisdiction?
Yes _____ No _____ An investigation will not necessarily bar you from volunteering.
5. Have you ever had your driver's license suspended or revoked for any reason?
Yes _____ No _____ Answering yes will not necessarily bar you from volunteering.

Criminal History Information

Please complete this Criminal History Information. Pacific Northwest Camp & Cedar Springs Camp may conduct a criminal history background check on you and request a copy of your driving record (if you may operate a vehicle on behalf of Pacific Northwest Camp & Cedar Springs Camp). Further dissemination of any records obtained is prohibited without your written permission. You will be notified of the results of the background check within 10 days of receipt and provided with a copy upon request.

Name: _____

Alias/Maiden Name: _____

Social Security Number: _____ Date of Birth: _____

1. Have you ever been convicted of any crime? Yes No

If yes, specify _____

For purposes of answering this question, conviction shall include any conviction in any jurisdiction, including convictions by way of trial, plea (guilty, "Alford", *nolo contendere*, or no contest even if they be later withdrawn), deferred prosecution, suspended sentence or stipulation. Conviction shall also include convictions that have subsequently been dismissed, expunged, vacated, reduced, mitigated, or otherwise stricken from official record. A conviction will not necessarily bar you from volunteering.

2. Have you ever had findings made against you in any civil adjudicative proceeding as defined in RCW 43.43.830? Yes No

If yes, specify _____

RCW 43.43.830 (3) "Civil adjudicative proceeding" is a judicial or administrative adjudicative proceeding that results in a finding of, or upholds an agency finding of, domestic violence, abuse, sexual abuse, neglect, or exploitation or financial exploitation of a child or vulnerable adult under chapter 13.34, 26.44, or 74.34 RCW, or rules adopted under chapters 18.51 and 74.42 RCW. "Civil adjudicative proceeding" also includes judicial or administrative orders that become final due to the failure of the alleged perpetrator to timely exercise a right afforded him or her to administratively challenge findings made by the department of social and health services or the department of health under chapter 13.34, 26.44, or 74.34 RCW, or rules adopted under chapters 18.51 and 74.42 RCW.

I declare, under penalty of perjury under the laws of the State of Washington, that the statements above are true and correct. I authorize Pacific Northwest Camp & Cedar Springs Camp to conduct a criminal background check on me and to obtain a copy of my driving record.

Signed this _____ day of _____, (year) _____, at _____
(location)

Applicant's

Signature: _____

Release

(INCLUDING AUTHORIZATION OF RELEASE OF INFORMATION, AND DEFENSE, INDEMNIFICATION AND HOLD HARMLESS OBLIGATIONS BY APPLICANT)

I, _____, have applied for a volunteer position at Pacific Northwest Camp & Cedar Springs Camp.

I authorize Pacific Northwest Camp & Cedar Springs Camp, in its efforts to process my application and to check my background and contact references, to provide a copy of this release to any person or entity, and authorize Pacific Northwest Camp & Cedar Springs Camp and other parties to treat a facsimile copy of this release as if it were the signed original.

I authorize Pacific Northwest Camp & Cedar Springs Camp to contact any person or entity to obtain information about me, including the employers, organizations, supervisors, governmental agencies and references that I list in my application and others identified by Pacific Northwest Camp & Cedar Springs Camp. Without limiting the foregoing, I understand and agree that this release allows the Department of Social and Health Services, including Child Protective Services, to release information concerning me.

I hereby request, consent to, and authorize any current or former employer, person, firm, corporation, organization, education or vocational institution, or government agency to provide Pacific Northwest Camp & Cedar Springs Camp with information they have regarding me, including the release of information concerning my performance, qualifications, personal and work history, dates of employment, dates of volunteer service, job titles, reasons for leaving, salary, and opinions about me. The released information may be in the form of a letter of reference, a response to an evaluation form prepared by Pacific Northwest Camp & Cedar Springs Camp, telephone interviews or other interviews initiated by Pacific Northwest Camp & Cedar Springs Camp, or any other means deemed appropriate by Pacific Northwest Camp & Cedar Springs Camp. I understand that the information released may include facts and/or opinions that are unfavorable to me and/or with which I may disagree.

I hereby expressly waive any and all rights I may have of access to any letter of reference, to any response to an evaluation form, to anything discussed in telephone conversations or interviews, or information otherwise obtained by Pacific Northwest Camp & Cedar Springs Camp, including any right to inspect and review, any right to have a copy made for my use, and any right to request an amendment of or correction to any released information.

I hereby release and agree to defend, indemnify and hold harmless Pacific Northwest Camp & Cedar Springs Camp and its past, present and future pastors, elders, deacons, leaders, employees, directors, officers, volunteers, agents, successors and assigns, and insurers from any and all liabilities arising from or in any way related to requesting or receiving information about me. I also release and agree to defend, indemnify and hold harmless any person or organization or entity (whether listed in my application or not) and its respective directors, owners, officers, employees, volunteers and agents who provide information or references about me to Pacific Northwest Camp & Cedar Springs Camp from and against any and all liability arising from or in any way related to their disclosure of any information or opinions about me.

I hereby acknowledge that I have read, understand, and willingly sign and agree to this document.

THIS STATEMENT CONTAINS A RELEASE OF CLAIMS AND AN OBLIGATION TO DEFEND, INDEMNIFY AND HOLD HARMLESS PACIFIC NORTHWEST CAMP & CEDAR SPRINGS CAMP AND OTHERS.
PLEASE READ IT CAREFULLY.

This signed Release must be a part of the application package. The Release must be mailed, faxed, or taken to Pacific Northwest Camp & Cedar Springs Camp for the application to be considered complete.

Applicant's

Signature: _____

Date: _____

Mail to:

**Pacific Northwest Camp
P. O. Box 570
Arlington, WA 98223**

To be completed by Cedar Springs Camp Board

- Background check completed (date)_____
- Phone Interview completed (if required)(date)_____
- PNWC Pre-screening approved by PNWC Board
- Application approved by Camp Board
- Pastor Reference completed
- Commander Reference completed
- Personal Reference complete
- Nursing License verified and reviewed

PNWC Committee Signature Date

CS Camp Board Signature Date

Notes: _____

Pacific Northwest Camp

Camp Rules

VISITORS

1. No friends may visit any camper or staff.
2. Parents may only visit if prior arrangements have been made 24 hrs in advance with the Camp Director.
3. All visitors must check in at the camp office and must wait for a PNW Camp escort.
4. Visitors must be accompanied at all times by a PNW Camp escort for liability reasons.

CLOTHING

1. No visible undergarments. No "spandex" clothing of any type.
2. Shorts must at least reach your fingertips when held directly at your side.
3. Skirts and dresses should be knee length or longer at all events including the Citation Ceremony.
4. All forms of clothing (except swimwear for males) must cover the wearer's midriff front and back.
5. No tank tops, spaghetti straps, camis, or low-cut necklines.
6. No lewd clothing which exhibits alcohol, drug, tobacco products, satanic symbols, inappropriate language, or other offensive displays.
7. No clothing which displays text or images that draw inappropriate visual attention to discreet parts of the anatomy.
8. For females, a modest suit, covering midriff with no low-cut necklines is required while swimming. Thong, g-string, and high French-cut styles are not acceptable.
9. For males, a "boxer" style suit with at least a 5 inch inseam & nylon or mesh liner is required while swimming.

OTHER ITEMS

1. No display of body piercing (other than earrings for females).
2. Footwear is required at all times except in the showers, cabins, and while swimming. Athletic shoes are required for Team Activity Time.
3. Public displays of affection are out of place at camp. Do not spend your days exclusively with one particular member of the opposite gender.
4. Once the chapel service has started, do not leave your seat to visit the restroom. These things should be taken care of beforehand. All counselors are expected to sit with campers and their team in the main section of the Chapel.
5. Hats, sunglasses, and swimwear are inappropriate during Bible Class and chapel.
6. Use quiet voices while outside after dark.
7. No personal electronic devices are allowed. This includes Radios, CD players, iPods, Cell Phones, electronic games, etc. All electronic items will be confiscated by the Camp Director and held until the end of camp. **Cell phones are NOT acceptable alarm clock devices.**
8. Camper violating any of the above policies will meet with the Camp Director and a designee to resolve the violation. Failure to comply with any of the policies will result in being sent home.
9. The use of all tobacco, alcohol, illegal drugs and firearms is prohibited at camp.

I have read and agree to joyfully comply with the above rules.

Print Name

Signature

Date

Pastoral/Church Representative Reference Questionnaire (non-family member)

(please give to the reference to fill out)

I _____, have consented and authorized Pacific Northwest Camp & Cedar Springs Camp to make a full and complete investigation of my personal background and have authorized any person, corporation, or other entity to provide any information of any sort (including fact and opinion) that they have regarding me.

Signature: _____
(Applicant's signature)

Date: _____

The above individual is applying to serve as a volunteer for Pacific Northwest Camp & Cedar Springs Camp (just for Awana clubbers and teens). As part of the application process, the Pastor and Awana commander or similar church leader must complete this reference. We value your input as a church leader who knows the applicant. All information provided will be kept in a highly confidential manner.

Please do not provide information concerning any matter that you know to be contained in a record that has been sealed or expunged under state or federal law.

Is the applicant a regular attendee of your church? Yes No

Is the applicant actively serving in your church? Yes No

How long have you known the applicant? _____

In what capacity have you know the applicant? _____

Please describe the area(s) of service the applicant is involved in at your church: _____

What do you consider to be the applicant's strengths and significant weaknesses? _____

** Continued on next page **

Without breaking any confidences please answer the following questions and give any details you are able.

Are you aware of whether the applicant has ever been investigated, charged, arrested and/ or convicted of child abuse or neglect, an offense involving actual or attempted sexual molestation of a minor, or an offense that would otherwise make him/her unsuitable for working with or in close proximity to children?

Yes No

Are you aware of any charge, claim or complaint ever having been made that the applicant has engaged in a sexual offense or other inappropriate sexual behavior?

Yes No

Are you aware of any charge, claim or complaint that the applicant has engaged in a crime involving violence, including domestic violence?

Yes No

Is there any fact or circumstance about the applicant's behavior, conduct, background or any other information that would call into question the advisability of entrusting the applicant with the supervision, guidance, and care of young people?

Yes No

Do you recommend, without hesitation, this applicant for service in the Pacific Northwest Camp & Cedar Springs Camp ministry?

Yes No

Thank you for participation in our child protection program! We are grateful to you for taking the time to complete this form. If you should have any questions or concerns, please contact us: the Pacific Northwest Camp & Cedar Springs Camp Committee at (360) 929-3194.

Name

Title

Date

Mail to:

**Pacific Northwest Camp
P. O. Box 570
Arlington, WA 98223**

Commander Reference Questionnaire (non-family member)

(please give to the reference to fill out)

I _____, have consented and authorized Pacific Northwest Camp & Cedar Springs Camp to make a full and complete investigation of my personal background and have authorized any person, corporation, or other entity to provide any information of any sort (including fact and opinion) that they have regarding me.

Signature: _____
(Applicant's signature)

Date: _____

The above individual is applying to serve as a volunteer for Pacific Northwest Camp & Cedar Springs Camp (just for Awana clubbers and teens). As part of the application process, the Pastor and Awana commander or similar church leader must complete this reference. We value your input as a church leader who knows the applicant. All information provided will be kept in a highly confidential manner.

Please do not provide information concerning any matter that you know to be contained in a record that has been sealed or expunged under state or federal law.

Is the applicant a regular attendee of your church? Yes No

Is the applicant actively serving in your church? Yes No

How long have you known the applicant? _____

In what capacity have you know the applicant? _____

Please describe the area(s) of service the applicant is involved in at your church: _____

What do you consider to be the applicant's strengths and significant weaknesses? _____

** Continued on next page **

Without breaking any confidences please answer the following questions and give any details you are able.

Are you aware of whether the applicant has ever been investigated, charged, arrested and/ or convicted of child abuse or neglect, an offense involving actual or attempted sexual molestation of a minor, or an offense that would otherwise make him/her unsuitable for working with or in close proximity to children?

Yes No

Are you aware of any charge, claim or complaint ever having been made that the applicant has engaged in a sexual offense or other inappropriate sexual behavior?

Yes No

Are you aware of any charge, claim or complaint that the applicant has engaged in a crime involving violence, including domestic violence?

Yes No

Is there any fact or circumstance about the applicant's behavior, conduct, background or any other information that would call into question the advisability of entrusting the applicant with the supervision, guidance, and care of young people?

Yes No

Do you recommend, without hesitation, this applicant for service in the Pacific Northwest Camp at Cedar Springs Camp ministry?

Yes No

Thank you for participation in our child protection program! We are grateful to you for taking the time to complete this form. If you should have any questions or concerns, please contact us: the Pacific Northwest Camp at Cedar Springs Camp Committee at (360) 929-3194.

Name

Title

Date

Mail to:	Pacific Northwest Camp P. O. Box 570 Arlington, WA 98223
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Professional Reference Questionnaire (non-family member)

(please give to the reference to fill out)

I _____, have consented and authorized Pacific Northwest Camp & Cedar Springs Camp to make a full and complete investigation of my personal background and have authorized any person, corporation, or other entity to provide any information of any sort (including fact and opinion) that they have regarding me.

Signature: _____
(Applicant's signature)

Date: _____

The above individual is applying to serve as a volunteer for Pacific Northwest Camp & Cedar Springs Camp (just for Awana clubbers and teens). As part of the application process, a personal acquaintance must complete this reference. We value your input as someone who personally knows the applicant. All information provided will be kept in a highly confidential manner.

Please do not provide information concerning any matter that you know to be contained in a record that has been sealed or expunged under state or federal law.

How long have you known the applicant? _____

In what capacity have you know the applicant? _____

To your knowledge, is the applicant a regular attendee of a church? Yes No Do not know

If yes, please provide the name of the church: _____

To your knowledge, is the applicant actively serving in a church? Yes No Do not know

If yes, please describe the area(s) of service the applicant is involved in at church: _____

What do you consider to be the applicant's strengths and significant weaknesses? _____

** Continued on next page **

Without breaking any confidences please answer the following questions and give any details you are able.

Are you aware of whether the applicant has ever been investigated, charged, arrested and/ or convicted of child abuse or neglect, an offense involving actual or attempted sexual molestation of a minor, or an offense that would otherwise make him/her unsuitable for working with or in close proximity to children?

Yes No

Are you aware of any charge, claim or complaint ever having been made that the applicant has engaged in a sexual offense or other inappropriate sexual behavior?

Yes No

Are you aware of any charge, claim or complaint that the applicant has engaged in a crime involving violence, including domestic violence?

Yes No

Is there any fact or circumstance about the applicant's behavior, conduct, background or any other information that would call into question the advisability of entrusting the applicant with the supervision, guidance, and care of young people?

Yes No

Do you recommend, without hesitation, this applicant for service in the Pacific Northwest Camp & Cedar Springs Camp ministry?

Yes No

Thank you for participation in our child protection program! We are grateful to you for taking the time to complete this form. If you should have any questions or concerns, please contact us: the Pacific Northwest Camp & Cedar Springs Camp Committee at (360) 929-3194.

Name

Title

Date

Mail to:	Pacific Northwest Camp P. O. Box 570 Arlington, WA 98223
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CAMP DOCTRINAL STATEMENT

- THE BIBLE:** We believe that the Bible is the complete, inspired Word of God and therefore infallible and inerrant. It is the final authority for Christian faith, worship, and conduct. (2 Timothy 3:16-17; 2 Peter 1:21)
- GOD:** We believe in one living and true God who exists in Three Persons – Father, Son, and Holy Spirit, having each the same nature, attributes and perfections.
(Matthew 3:16-17, 28:19; John 1:1-2, 14, 10:30, 14:15-17; 1 Corinthians 8:6; 2 Corinthians 13:14)
We believe in God as absolute and holy Creator and Sustainer of the universe, and that creation was by divine command from nothing. (John 1:3, 10; Acts 17:24-25; Genesis 1:1)
We believe in God as the Sovereign Ruler with complete and total control over all.
(Genesis 14:19; Deuteronomy 32:39; Isaiah 14:24, 27; Isaiah 45:6-7; Romans 8:28-29)
- GOD THE SON:** We believe that Jesus Christ was born of a virgin and that He lived a sinless life. We believe that He was crucified, shed His blood, died to pay the penalty for our sins and was raised bodily from the dead on the third day and ascended unto God the Father; and that Christ will return personally, bodily and visibly.
(Isaiah 7:14, 9:6; Hebrews 1:1-2, Luke 1:30-35; John 1:1-5, 10-14, 14:3; Colossians 2:9; 1 Corinthians 15:3-4; Acts 1:3,11)
- GOD THE HOLY SPIRIT:** We believe that the Holy Spirit convicts of sin, regenerates, indwells, baptizes and seals all believers at the moment of their salvation; that believers are baptized into the body of Christ at the moment of salvation and the filling of the Holy Spirit is an ongoing process that may occur at any time in the believer's life.
(John 3:5, 16:7-11; Ephesians 1:13, 4:30, 5:18; 1 Corinthians 6:19, 12:13)
- MAN:** We believe that man was created in the image and likeness of God, but that all men inherit a sinful nature and are lost sinners separated from God in need of salvation; and of themselves they are utterly unable to remedy their lost condition. (Genesis 1:26-27; Romans 1:18, 3:23, 5:12; Ephesians 2:1-3, 12)
- SALVATION:** We believe that God has provided salvation as a gift through offering His Son on the cross of Calvary and allowing His blood to be shed to atone for our sins. We are saved and justified when we recognize ourselves as sinners and receive salvation through personal faith in Jesus Christ and His finished work on the cross as our sacrifice for sin. Salvation is by grace through faith plus nothing; and once saved, we cannot be lost; we are eternally secure in Christ.
(John 3:16; 1 John 4:14; Acts 13:38-39; Romans 4:5, 6:23, 8:1, 38-39; John 10:27-29; Ephesians 2:8-9)
- THE CHURCH:** We believe that the true Church is composed of all persons who are regenerated by the Holy Spirit through saving faith in Jesus Christ; that they are united together in the body of Christ of which He is Lord and Head; and are commissioned for the God-given tasks of worshiping, fellowshiping, teaching, evangelizing and exercising the spiritual gifts.
(Acts 2:42, 47; Romans 12:5; Ephesians 1:22-23, 5:23; 1 Corinthians 12:12-14)
- ORDINANCES:** We believe in two ordinances for the believer: Baptism by immersion and the Lord's Supper; both of which are an act of obedience, but not for securing our salvation.
(Matthew 28:19-20; Acts 2:38, 41, 8:12, 35-38; Luke 22:19-20; 1 Corinthians 11:23-29)
- THE CHRISTIAN LIFE:** We believe that the grace of God teaches us to "live soberly, righteously, and godly", walking in holiness, living a life of separation from the world and separation "unto God", being conformed to the image of our Lord and Savior Jesus Christ. As a new creation, walking in the Spirit, the Christian learns to grow in faith, in obedience to Scripture, in prayer, in fellowship with the saints and in a life of service. (Galatians 5:16-26; Titus 2:11-13; Hebrews 10:25; Ephesians 4:20-24; Hebrews 11:6, 12:1-2; Ephesians 6:18; 2 Corinthians 5:10; 1 Corinthians 3:10-15)
- SECOND COMING:** We believe in the personal, pre-millennial and imminent return of Jesus Christ; in the bodily resurrection of the dead of all men – the saved to eternal blessedness, the lost to eternal punishment. (1 Thessalonians 4:13-17; 1 Corinthians 15:51-52; Titus 2:11-13; John 14:1-6; Matthew 25:46; 2 Peter 3:10)

CHILD PROTECTION POLICY

Provided by Cedar Springs Camp

The camp experience, to be successful, is achieved when everyone conducts themselves in a God honoring manner. This conduct must be honoring at all times, not just while at camp. The following material provides the basic principles all persons involved in this ministry shall adhere to.

1. Child Protection Program Objectives

- a. The primary goal of the Child Protection Program (CP) is to reduce the risk of harm to children and provide a safe and secure environment for children participating in the PNWC at Cedar Springs Camp sponsored camps.
- b. By implementing child protection policies and procedures, we also reduce the risk of misunderstandings and false accusations against volunteers.

2. Basic Child Protection Standards of Conduct

- a. A minimum of two adults is required in attendance during all PNWC at Camp Cedar Springs Camp activities.
- b. Private one-on-one contact between adults and children or youth is not permitted. In situations that require personal conferences, the meeting is to be conducted in the clear view of others, always utilizing the rule that women counsel girls and men counsel boys.
- c. Adults must respect the privacy of children and youth in situations such as changing clothes and taking showers, and intrude only to the extent that health and safety require. Adults must protect their own privacy in similar situations.
- d. Camps are encouraged to have separate shower and latrine facilities for males and females. When separate facilities are not available, separate times for male and female use must be scheduled and posted for showers.
- e. Adults and children or youth of the same sex may occupy dormitory or single-room accommodations, provided there is a minimum of four children or youth. All adults on site must be CP trained.
- f. Male and female leaders require separate sleeping facilities. Married couples may share the same quarters if appropriate facilities are available.
- g. PNWC at Cedar Springs Camp does not recognize any secret organization as part of its ministry programs or activities. All aspects of the camping ministry are open to observation by parents.
- h. Volunteers agree to abide by the dress code for the activity. If there are questions regarding the attire, those questions will be directed to the Camp personnel responsible for the event/activity. They will have final say in the matter. Remember, as volunteer, you are a testimony to the kids and all those you come in contact with.
- i. Discipline used during PNWC at Cedar Springs Camp approved camp activities must be constructive and reflect the values of PNWC at Cedar Springs Camp. Corporal punishment is never permitted.
- j. Hazing and initiations are prohibited and may never be included as part of any PNWC at Cedar Springs Camp activity.
- k. Children and youth must remain in public areas of the camp. Campers are not allowed to pair off and should remain in groups of four or more.
- l. If transporting campers due to a medical related necessity, the two adult rule must be followed. Before transporting campers, every attempt must be made to contact the parent informing them of the destination and purpose of the trip, unless it is a serious emergency deemed by the Camp nurse and Camp Committee.

3. Training and Supervision

- a. A minimum of two adults (both previously screened) must be present during all Cedar Springs Camp activities.
- b. Permission forms and liability waivers signed by the parent or guardian must be obtained for all overnight PNWC at Cedar Springs Camps.
- c. Proper supervision of youth workers is to be provided at all times when they are working with children and youth. PNWC at Cedar Springs Camp does not endorse or approve of unsupervised time alone with children or youth in the context of any PNWC at Cedar Springs Camp approved camp activity.
- d. All volunteers must read and follow the Basic Protection Standards of Conduct and agree to adhere to those standards of conduct. These standards of conduct will be used to train people to serve at PNWC at Cedar Springs Camp camps. All volunteers must always follow the CP guidelines for all camp activities.

- e. Volunteers and minors are not to bring items or devices such as fireworks, weapons, alcohol and/or illegal drugs to PNWC at Cedar Springs Camp camps. Violence or threats of violence towards another person will not be tolerated, and the minor exhibiting such behavior will be sent home.

4. Reporting Requirements

- a. The governing principle of PNWC at Cedar Springs Camp is that we know it is God's heart to care for and protect children (Matthew 18: 1-10). Therefore, all volunteers of PNWC at Cedar Springs Camp have a responsibility to report any actual or suspected child abuse or neglect whether or not it occurred at a PNWC at Cedar Springs Camp.
- b. If an incident of suspected or known child abuse or neglect arises, the camp volunteer must immediately notify any Cedar Springs Camp Board member, report to the appropriate state agency according to locally mandated laws; and notify the Director of PNWC at Cedar Springs Camp in writing. A written report must be forwarded immediately (within 24 hours) to the Director of PNWC at Cedar Springs Camp. The report must include the state agency the report was made to and the name and phone number of the state employee that took the report.
- c. It is important to remember that you do need to report abuse or suspected abuse; however, you do not attempt to investigate and determine if the abuse or neglect is true. Determining the particulars of what happened is to be left to the proper authorities.
- d. Sometimes a child or youth will be surprised that a trusted adult reported what the child or youth disclosed to him or her. You should not feel that you have violated confidentiality by reporting abuse. Child abuse is illegal and must be reported. You may be the only one who knows about this situation that is in a position to report it. You need to take the proper steps to report the situation.
- e. No volunteer shall conduct any investigation or attempt to "solve the problem" independently. Investigations are to be handled by the proper authorities.

5. Responding to the Media

- a. If an actual allegation of child abuse arises, any media or public inquiry is to be directed to the chairman of PNWC at Cedar Springs Camp at (360) 929-3194.
- b. Any person who has been accused of or is suspected of child abuse or neglect shall be removed immediately from any service that is connected with PNWC at Cedar Springs Camp.
- c. The phone number for the State of Washington "Child and Adult Abuse" reporting is 1-866-363-4276.

6. Communication with Campers (outside of camp)

- a. Camper addresses will be used for official PNWC business and will not be distributed or released.
- b. No communication between counselor and camper is acceptable without prior parental/legal guardian consent.
- c. We encourage Godly communication between counselors and campers. The content must be limited to encouraging the camper personally in their spiritual development by maintaining personal devotions and Bible reading, regular church attendance, and encouraging them to qualify for camp in the following year.
- d. ***At no time before, during, or after camp will there be any form of physical behavior and/or communication that is not in accordance with the Child Protection Policy Document and the information contained in the child protection training.***

CAMP NURSE EXPECTATIONS

Camper population is between 200-300 campers, ages 11 to 18.
Counselors and staff number around 50.
Nurse's assistant or helper present as well.

Camp Nurse Responsibilities

- Review camper applications to be familiar with medical issues before camp.
- Register medications and communicate with parents at opening day.
- Dispense meds to campers.
- Store meds for entire camp.
- Triage camper complaints
- First aid for minor injuries
- Ensure health and safety of campers and staff
- Daily sick call
- Communicating specific camper health needs (allergies, special diets) to staff
- Medical record keeping
- Liaising with local doctors, hospitals, and pharmacies
- Communicate with parents as needed
- Accompany sick/injured campers or staff to the hospital or to medical appointments
- Participate in camp activities and events
- Communicate with director with walkie talkies.

Qualifications and Requirements

- RN or LPN degree
- Must be available for at the entire seven days of camp / 24 hours each day.
- Flexible-- able to adapt to different environments and schedules
- Confidence in nursing skills
- Responsible, hard-working
- Good bedside manner, friendly and personable
- Strong assessment abilities
- Prior experience with children (does not have to be in a medical capacity)
- Enjoy an active lifestyle
- Team player
- ER and/or pediatric unit experience preferred, but not required
- Nursing staff is covered under the camp's malpractice insurance.

Living Accommodations

- Accommodations are attached to Nurses Station.
- Private or semi-private room with full-sized bed (linens provided) and bunks for patients.
- Shared bathroom (share only with other nursing staff)
- Meals provided in camp dining hall

Opening Day Duties

- All campers with meds are required to register with the nurse before their parents leave.
- Set up tables and chairs in front of cabin. Might need umbrella for shade and water cooler and cups.
- Receive and record meds. Place in bag with camper's name.
- Compare and correct medical profile from parents with medical records.

Here is an example of the camp's Med Sheets Records.

Camper Medical Report

Last Name, First Name 2/8/00 Cabin #: 11-12 Team Color: Red

Home Phone: (206) 9139779 Dad's Name: First Name Dad's Phone: (206) 111-1111

Mom's Name: First Name Mom's Phone: (425) 111-1111

Allergies: No

Medications: No

Physical Condition: No

Over the Counter: Yes

Camper Health Screening

Signs/symptoms of illness/injury upon arrival? ___NO ___ Yes as noted below

History of exposure to communicable diseases? ___NO ___ Yes as noted below

Additions or corrections to health history? ___NO ___ Yes as noted below

Currently taking medicines? ___NO ___ Yes as noted below

Drug	Dosage	Frequency	Reason
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Notes: