



**Application Deadline:** 4/20/2020

**Qualifications:** Please see South Dakota 4-H Camps Counselor Volunteer Job Description for detailed list of qualifications and responsibilities.

**Applicant Information:** (Please type or print.)

Name (first and last): \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_  
City State Zip

Email Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Birth Date: \_\_\_\_\_ Age: \_\_\_\_\_ years  Male  Female

Can you perform the essential functions of the South Dakota 4-H Camp Counselor job with or without reasonable accommodations?  Yes  No

**References:** Give names and addresses of three persons (not relatives) having knowledge of your character, experience, work, habits and ability.

Name	Relationship to Applicant	Phone

**Camp Experience:** Please list any camp experience you have had as a camper or staff member. This is not exclusive to camps through the South Dakota 4-H Youth Development Program.

Dates	Camp/Name of Director	Location	Camper or Staff?

With your application please include a brief biographical sketch, including specialized training in camping, and experience or training in other fields which might have a bearing on the position for which you are applying. Additionally, please answer the following questions: What contributions do you think you can make at camp? What benefits do you think a well-run camp can have for youth?

**Harassment:** The camp’s policy is to prohibit all forms of harassment by our employees and volunteers. This includes sexual, racial, religious, and other forms of harassment. Have you ever been accused of harassment of any person including, but not limited to, workplace harassment? (Note: a prior accusation is not an automatic bar to employment. The type of accusation and when it occurred will be evaluated by the camp before a decision is made.)  Yes  No

If yes, please explain.

**Criminal Record:** Have you ever been convicted of a crime, other than a minor traffic offense? If yes, please describe. (Note: a prior conviction is not an automatic bar to employment. The type of conviction and when it occurred will be evaluated before any decision is made.)  Yes  No

If yes, please explain.

**Dates of Employment:** Please indicate the camp for which you are applying. Preference will be given to applicants who are available for all the youth camp sessions at a particular location. There will be a mandatory staff training for each camp that will be announced when positions are filled.

Camp Poinsett (Arlington, SD)  
Youth Camp Session 1: June 3-5  
Youth Camp Session 2: June 8-10  
Youth Camp Session 3: June 10-12

Storm Mountain Center (Rapid City, SD)  
Youth Camp Session 1: June 8-10  
Youth Camp Session 2: June 10-12

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

Parent or Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

4-H Youth Program Advisor Signature \_\_\_\_\_ Date \_\_\_\_\_

Mail completed application by April 20<sup>th</sup>, 2020 to:  
South Dakota 4-H Camps  
c/o Katherine Jaeger, 4101 W 38th Street, Suite 103,  
Sioux Falls, SD 57103

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Katherine.Jaeger@sdstate.edu

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