Generalist Volunteer Interes	st Form	
Date of Application		
Personal Information		
Name		
Address		
Cell phone	Email	
If under 21 years old on June 1, o		
Birth date	,	
Parent name	phoneemail	
What week is best for you: (give	e dates) or camp week you have been assigned:	
First choice	Second choice	
Flexible with dates except	t for the following weeks	
Priority Application deadline May 1	•	
Applications can be made to Camp	Director until July 6, 2019	
	you wish to volunteer during your week at camp, youth age	
•	per week. Full time volunteering is limited to former staff or veral summers. This will determine your camper charge:	
•	Adult tenting Youth (16 or 17 years)	
full time = Free room & board		
	Fee \$250Fee \$275	
Scholarships are available to help	p pay this fee, please contact the Registrar	
at 612-399-6116 or email Registr		
<u>-111-1</u>	- C	
Please tell us briefly about your	interest and experiences in the generalist areas or	
cleaning/camp preparation at Ca	amp UniStar.	
	•	
Is there anything else you would	d like us to know about vou?	
3	,	
We would appreciate one or two	o references:	
Name	Name	
Fmail	Fmail	

DISCLOSURES: If you answer "Yes" to any of the questions below, please explain the nature of the offense and provide the date of the offense and the county and state in which it occurred.

Have you ever been convicted of a criminal offense?

Do you have any criminal charges pending? If yes, please explain:

Are you currently on probation or parole? If yes, please explain:

Have you ever committed, or has any civil action ever been filed against you for reasons related to sexual misconduct or child abuse? If yes, please explain:

Have you ever resigned from employment or been disciplined or terminated by an employer for reason related to sexual misconduct or child abuse? If yes, please explain:

APPLICANT STATEMENT

I certify that this volunteer application was completed by me and that all of the information on this application is true and correct to the best of my knowledge. I understand that any falsification, misrepresentation, or omission of facts called for herein will result in my disqualification from further consideration as a volunteer. In addition I hereby authorize Camp Unistar to obtain and/or request information about my criminal history from any entity chosen specifically for conducting this search, to release information regarding any record of charges or convictions contained in its files, or in any criminal file maintained on me, whether said file is a local, state, or national file, and including but not limited to accusations and convictions for crimes committed against minors, to the fullest extent permitted by city, county, state, and federal law. I do release said entities from all liability that may result from any such disclosure made in response to this request. I understand that this volunteer application is not valid without my signature.

Name Date

Thanks very much for your energy, commitment, and dedication. Please complete, print, sign, and send your application for UniCorps Volunteer to:

Marla Siegler 2143 Windsor Way Golden Valley MN 55422 email mksiegler@comcast.net after Memorial Day please send to Camp Unistar 25816 Star Island SE Cass Lake, MN 56633-3339 phone: 218-335-2692 email Director@CampUniStar.org