



Brave Hearts New Staff Application

Applications due May 1, 2010

You must be 21 years of age to be a Brave Hearts Camp Volunteer

General Information

Name: _____ M _____ F _____

Address: _____ City _____ ST _____ Zip _____

Date of Birth: _____ Social Security Number: _____

Telephone - Cell: _____ Work: _____ Home: _____

Email Address: (please print clearly)

Employer: _____ Position: _____

Have you ever been convicted of a felony or misdemeanor? Yes No

If Yes, please explain in detail:

Have you ever been accused in a child abuse incident? Yes No

If Yes, please explain in detail:

T-Shirt Size Adult: S M L XL XXL

Emergency Information: (MUST BE COMPLETED)

Name: _____

Name: _____

Phone: _____

Phone: _____

Relationship: _____

Relationship: _____

I understand that the People's Burn Foundation (PBF) mission is to provide a safe environment for children

Experience

How did you find out about Brave Hearts' Camp? Where you referred by anyone?

Please describe any experience you have as a youth counselor:

What characteristics do you have that make you believe you would be a positive role model to a young burn survivor:

Do you have any areas of expertise that could be utilized at camp?

who have suffered burn injuries. It is PBF's goal to provide an atmosphere for the children to build self-esteem, confidence and friendships in a non-judgmental way.

I understand and agree to abide by the policies set forth by PBF and Bradford Woods and I understand that disregarding any portion of these policies can result in immediate dismissal of volunteer duties at PBF's Brave Hearts Camp.

I hereby authorize The People's Burn Foundation to conduct a background investigation and understand the purpose of this inquiry is to determine my eligibility as a volunteer at Brave Hearts Camp.

I agree to attend the mandatory training on June 5, 2010 at Bradford Woods.

Certifications (Please list all)

_____ EMT _____ Paramedic _____ Diver _____ RN _____ LPN _____ MD

I further certify the information contained within this application is true and I agree and understand that any false statements or misrepresentations may cause rejection of this application or dismissal as a Brave Heart Camp volunteer.

**THE PEOPLE'S BURN FOUNDATION BRAVE HEART CAMP AND BRADFORD WOODS IS
ALCOHOL/DRUG FREE!
"ZERO TOLERANCE"**

Date: _____

Signature _____

**Mail to:
2506 Willowbrook Parkway Ste 222
Indianapolis, IN 46205
Fax to: 317-685-2330**

Email to: callison@peoplesburnfoundation.org