



Therapy Intensive Programs, Inc.
Kathy Berger, Director
♥ A Special Camp for Special Kids and their Families ♥

KRIS' CAMP 2009: STAFF APPLICATION

NAME: _____ **DOB:** _____ **SSN (Social Security #):** _____
(This is required by the IRS for all therapists and assistants grossing \$600 or more in the fiscal year.)

ADDRESS: _____

HOME PHONE: _____

WORK PHONE: _____

MOBILE PHONE: _____

EMAIL: _____

POSITION OF INTEREST:

- Therapist (type: _____)
 Assistant
 Volunteer
 Sib camp staff
 Cook

CAMPS/DATES AVAILABLE:

- | | | | |
|---------------------------|--------------------------|------------------------------|--------------------------|
| CA June 13-19 [ages 4-12] | <input type="checkbox"/> | AZ July 21-27 [ages 4-12] | <input type="checkbox"/> |
| CA June 21-27 [ages 4-8] | <input type="checkbox"/> | AZ July 30-Aug 5 [ages 4-12] | <input type="checkbox"/> |
| CA I Can Camp June 26-29 | <input type="checkbox"/> | CT Aug 13-19 [ages 4-12] | <input type="checkbox"/> |

I AM INTERESTED IN ATTENDING THE CONTINUING EDUCATION COURSE IN:

- Phoenix, AZ May 27-28th
 Idyllwild, CA June 17-18th

3359 Creek Road ♥ Salt Lake City, UT 84121
phone: 801-733-0721 or 850-386-2765
fax: 801-942-1750
web: www.kriscamp.org
email: info@kriscamp.org

PLEASE EXPLAIN WHY YOU ARE INTERESTED IN WORKING AT KRIS' CAMP. (You may use the back of the application or additional pages as needed).:

PLEASE LIST ANY DIRECT EXPERIENCE OR EDUCATIONAL EXPERIENCE YOU HAVE HAD WORKING WITH CHILDREN, CHILDREN WITH DISABILITIES, ETC.

1. _____
2. _____
3. _____

DO YOU HAVE ANY HISTORY OF BACK PROBLEMS OR ANY MEDICAL PROBLEMS THAT MAY AFFECT YOUR VOLUNTEER WORK WITH KRIS' CAMP? PLEASE EXPLAIN.

PLEASE LIST REFERENCES THAT WE MAY CONTACT:

1. WORK REFERENCE:

COMPANY :
DATES OF EMPLOYMENT:
PERSON TO CONTACT:
ADDRESS:
PHONE :

2. EDUCATIONAL REFERENCE

SCHOOL/PROGRAM :
DATES ATTENDED:
PERSON TO CONTACT:
ADDRESS:
PHONE :

3. PERSONAL REFERENCE

PERSON TO CONTACT:
RELATIONSHIP:
ADDRESS:
PHONE :

PLEASE RETURN THIS APPLICATION, ALONG WITH 3 LETTERS OF REFERENCE (ONE MAY BE A PERSONAL REFERENCE) TO:

KRIS' CAMP
3359 Creek Road, Salt Lake City, UT 84121
or leidy@kriscamp.org; or fax to: 801-942-1750