

INTERNATIONAL PROGRAM APPLICATION

Signature Services Corporation

2705 Hawes Avenue

Dallas, Texas U.S.A 75235



Please include a check for \$35 with application.
Please type or print clearly in black/blue ink.

PERSONAL INFORMATION

Surname _____ First Name _____

Full Postal Address _____ City/Town _____

Country _____ Postcode _____ Phone _____

E-Mail _____ Parents' Phone _____

Date of Birth (Month/Day/Year) _____ Age _____ Birthplace _____

Gender Male Female Height _____ Weight _____

Passport No. _____ Driver's License _____

Are you married? Yes No If yes, is your husband or wife applying? Yes No

What is your earliest date of departure? _____ Date due home _____

EDUCATION AND EMPLOYMENT INFORMATION

Are you currently a student? Yes No Course/Subject _____

Are you employed full-time? Yes No Occupation _____

Do you have previous experience on an international cultural exchange program? Yes No

If yes, where and in what position? _____

Do you have previous experience with American summer camps? Yes No

If yes, where and in what position? _____

CAMP TYPES

Will you work at a camp with religious emphasis? Yes No

Do you have a personal religious commitment? Yes No

Are you willing to participate in bible studies and devotions? Yes No

Do you attend church services regularly? Yes No If yes, what church? _____

Do you have experience pioneering, scouting or guides? Yes No

If yes, please describe. _____

SKILLS

Please check experienced skills as they apply.

	Willing	Experienced		Willing	Experienced
Cooking	<input type="checkbox"/>	<input type="checkbox"/>	Dishwashing	<input type="checkbox"/>	<input type="checkbox"/>
Dining hall service	<input type="checkbox"/>	<input type="checkbox"/>	Food preparation	<input type="checkbox"/>	<input type="checkbox"/>
Dining hall manager	<input type="checkbox"/>	<input type="checkbox"/>	Assistant cook	<input type="checkbox"/>	<input type="checkbox"/>
			Baking	<input type="checkbox"/>	<input type="checkbox"/>

Please fully describe your involvement with the skills you have detailed on this application. Describe your work experience - positions held, length of time, specific duties and responsibilities.

BACKGROUND

What qualities do you possess that will make you an excellent candidate for a position with Signature Services?

What experience do you have that demonstrates your ability to work long hours and to live in a community with strict rules (i.e. no smoking, no drinking)?

How well do you work as a member of a team? Give an example.

Give examples of your ability to adapt to new and different situations?

If English is not your first language, how confident are you in your ability to work effectively using the English language and why?

Have you ever been away from home for an extended peiod of time? ___Yes ___No If yes, please specify.

ADDITIONAL INFORMATION

Nondisclosure of any medical/criminal history will result in cancellation from the program and forfeiture of all payments made to Signature Services. All participants are required to be in good physical and mental health.

- | | |
|--|--------------|
| 1. Do you smoke? | ___Yes ___No |
| 2. Do you have any visible body tattoos and/or piercings? | ___Yes ___No |
| 3. Do you have any dietary restrictions? | ___Yes ___No |
| 4. Do you have any health problems? | ___Yes ___No |
| 5. Are you presently on any medication? | ___Yes ___No |
| 6. Do you have any allergies or require special medical treatment? | ___Yes ___No |
| 7. Do you have any physical disabilities? | ___Yes ___No |
| 8. Have you ever been a victim of sexual abuse? | ___Yes ___No |
| 9. Have you ever been a victim of physical abuse? | ___Yes ___No |

If you answered yes to questions 8 or 9, you must complete an additional information sheet supplying all details.

- | | |
|---|--------------|
| 10. Have you ever suffered from a nervous breakdown, depression or mental disorder? | ___Yes ___No |
| 11. Have you ever had an eating disorder (ex. anorexia)? | ___Yes ___No |

As you will be working with children, we require that you give details of all convictions since the age of 16, including dates and judgements and any convictions that may normally be regarded as "spent". These will be subject to official investigation. Persons with drug, violence, or child abuse convictions may not apply.

- | | |
|--|--------------|
| 12. Have you ever been convicted for any offense or crime? | ___Yes ___No |
| 13. Are you currently subject to a police investigation? | ___Yes ___No |
| 14. Have you ever been charged with a criminal offense? | ___Yes ___No |

If yes to any, please specify _____

EMERGENCY DETAILS

Doctor's Name _____ Phone _____

Emergency contact (friend or family) name _____

Address _____

Phone _____

AGREEMENT

The facts set forth in my application for employment are true and complete. I understand that if employed, any false statements on this application may result in my dismissal. I further understand that this application is not and is not intended to be a contract of employment, nor does this application oblige the employer in any way if the employer decides to employ me. I also understand that I will have to adhere to camp policies and procedures such as curfew, no smoking, no drinking, and agree to abide by these policies.

Signature of Applicant