



P.O. BOX 1880
BREWSTER, MASSACHUSETTS 02631-0062
(508) 896-3451 (508) 896-3626 FAX (508) 896-8272

CAPE COD SEA CAMPS
Staff Information and
Voluntary Disclosure Statement

Please Attach
Current Photo
Here

PERSONAL INFORMATION:

Name _____
Last First Middle (Nickname)
Birthdate (Mo/Day/Yr) _____ Male _____ Female _____ Marital Status _____ Social Security Number _____
Date first began work at CCSC - Hire Date _____ Do you smoke? Yes _____ No _____
Day Mo Yr
Other names by which known (e.g., maiden name): _____ Spouse's
Name _____
Children's Name Age Children's Name Last Age First

ADDRESS INFORMATION:

Permanent Winter/ Home PO Box or Street Address _____
City _____ State _____ Country _____ Zip _____
Home Telephone Number _____ Cell Number _____ e-mail _____
School/Business Address _____ Street _____
City _____ State _____ Country _____ Zip _____
School/Bus Tel Number _____ Cell Number _____ e-mail _____
Summer Home PO Box or Street Address _____
City _____ State _____ Country _____ Zip _____
Summer Telephone Number _____ Cell Number _____ e-mail _____

PREVIOUS RESIDENCE(S) FOR LAST FIVE (5) YEARS (Include college & home residences):

City _____ State _____ Years _____
City _____ State _____ Years _____
City _____ State _____ Years _____
City _____ State _____ Years _____
City _____ State _____ Years _____

DRIVER'S LICENSE AND AUTOMOBILE INFORMATION: All staff must submit a copy of your driver's license with this form.

Copy of Driver's License Attached: YES _____ No _____
Driver's License # _____ State Issued _____

If you will be bringing an automobile to camp, please fill out the following information:

Auto Model _____ Color _____ Year _____ Car License # _____ State _____



EDUCATION:

| High School/College | Major | Degree | Graduation Date |
|---------------------|-------|--------|-----------------|
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |

CURRENT CERTIFICATIONS:

To receive monies for any certificates identified below, we must have a current copy on file at camp. Return copies of certificates with this form..

| | Expiration Date | | Expiration Date |
|------------------------|-----------------|-------------------------|-----------------|
| Mass. Water Safety | _____ | CPR | _____ |
| Community Water Safety | _____ | CPR Instructor | _____ |
| Lifeguard | _____ | First Aid | _____ |
| LG Instructor | _____ | First Aid Instructor | _____ |
| WSI | _____ | U.S. Small Boat Sailing | _____ |
| ARC Small Craft Safety | _____ | Specific Area | _____ |
| Other Certificates | _____ | | |

CAMP INFORMATION:

Years as a former CAMPER _____ to _____ Camp _____

Years as a former STAFF _____ to _____ Position _____ Camp _____

Years as a former STAFF _____ to _____ Position _____ Camp _____

Unit Preference: (In order of preference... 1=The Best...5=The Least, please indicate your choices.)

Resident Camp Unit Ages 7-9 _____ 10-11 _____ 11-12 _____ 13-14 _____ 14-17 _____

Day Camp Unit Ages 4-6 _____ 6-7 _____ 8 _____ 9 _____ 10 _____ 11 _____ 12-13 _____ 14-17 _____

Activities: (In order of preference, which areas would you like to teach and/or assist this summer?)

Teaching: 1. _____ 2. _____ 3. _____ 4. _____

Assisting: 1. _____ 2. _____ 3. _____ 4. _____

How do you feel last summer's experience or this school year's experience may make you a better counselor to children? (Please use the space below.)

CAPE COD SEA CAMPS

VOLUNTARY DISCLOSURE STATEMENT FOR ALL CAMP STAFF:

1. **PAST EMPLOYMENT:** Identify five (5) years prior work history. You may include verified work performed on a volunteer basis. (Continue on a separate sheet if necessary.)

| Employer/Organization | Employer Name | Address | Telephone | Dates Employed |
|-----------------------|---------------|---------|-----------|----------------|
| | | | | |
| | | | | |
| | | | | |
| | | | | |

2. **REFERENCES:** Were you employed at Cape Cod Sea Camps last season? YES_____ NO_____
 If NO, please list 3 references from individuals not related to you. CCSC references including the Directors or immediate CCSC Supervisor, are acceptable if employee has missed a season.

| Name | Relationship/Occupation | Address | Dates Known | Telephone |
|------|-------------------------|---------|-------------|-----------|
| | | | | |
| | | | | |

3. **Have you ever been convicted of any crime relating in any manner to children and/or your conduct with them?** YES_____ NO_____
 If you answered yes, please explain: (Use separate sheet if necessary)

4. **Have you ever been convicted of any crime including, but not limited to, those Listed below, and/or any crime similar in any manner to those listed below?** YES_____ NO_____

- Indecent assault and battery on a child under fourteen
 - Indecent assault and battery on a mentally retarded person
 - Indecent assault and battery on a person who has obtained the age of fourteen
 - Rape
 - Rape of a child under sixteen with force
 - Assault with intent to commit rape
 - Kidnapping of a child under sixteen with intent to commit rape
 - Distribution and trafficking of narcotics or other controlled substances
 - Intent to commit any of the above crimes
- If you answered yes to any of the above, please explain: (Use separate sheet if necessary)

5. **Have you ever been adjudged liable for civil penalties or damages involving sexual or physical abuse of children?** YES_____ NO_____
 If you answered yes, please explain: (Use separate sheet if necessary)

6. **Are you now or have you have ever been subject to any court order involving sexual or physical abuse of a minor including, but not limited to a domestic order or protection?** YES_____ NO_____
 If you answered yes, please explain: (Use separate sheet if necessary)

7. *Have your parental rights ever been terminated for reasons involving sexual or physical abuse of children?* YES_____ NO_____

If you answered yes, please explain: (Use separate sheet if necessary)

8. *Have you ever been convicted of a felony or a misdemeanor within the last 5 years?* YES_____ NO_____

If you answered yes, please explain: (Use separate sheet if necessary)

I understand that:

- a. Cape Cod Sea Camps may deny employment to any person who answers “yes” to any one of questions numbered 3-8. If hired and the employer later discovers circumstances that would indicate a “yes” answer to any of the above questions, employment may be terminated immediately.
- b. The information provided on this form is subject to verification, which may include a criminal history check and request from any Central Registry of child abusers.
- c. Cape Cod Sea Camps may terminate employment or volunteer service of any person if that person is found, regardless of when discovered, to:
 - 1) have a history of complaints of abuse of a minor;
 - 2) have resigned, been terminated or been asked to resign from a position whether paid or unpaid, due to complaint(s) of sexual abuse of a minor; and/or
 - 3) have falsified or omitted information in this disclosure statement.
- d. Cape Cod Sea Camps is required by the Commonwealth of Massachusetts to obtain a criminal offender record information (CORI) and a Sex Offender Registry (SORI) check for all employees.
- e. This disclosure statement must be updated yearly.
- f. I verify that all the information I have provided Cape Cod Sea Camps is correct. If any of the information is false, I understand I may be terminated from my position at Cape Cod Sea Camps.
- g. Unless otherwise stated, my signature permits camp to use photographs or video pictures of myself in the course of the program for publicity of camp or the American Camp Association.

Date

Signature

Print Name

Date

Signature of Minor’s Parent or Guardian

Print Name