



Summer 2010

Dear Friend,

Thank you for your interest in Camp Yaldei. It is amazing to see how young individuals give of themselves to be part of the Yaldei family.

Camp Yaldei is a place where children with developmental disabilities thrive. With a one- to-one ratio of camper to counselor, the staff works hard to ensure that the children's experience is full of fun and laughter- all the while learning the daily living skills so crucial to their growth and development. The children enjoy all the same activities as their typical peers: swimming, water sports, boating, arts and crafts, drama, baking, music, miniature golf...not to mention special events and evening programs.

Each session at Camp Yaldei is brief and intense. Looking after a special needs or handicapped child requires a commitment of both time and passion. This may include such tasks as assisting a child with bathing, toileting and feeding.

Applicants must have completed their senior year of high school or be 18 years of age in order to work at camp. Although you may apply for a specific position it is possible that you will be accepted for a different one. Many camp positions require the staff to help out in other areas so you may be asked to contribute some time elsewhere throughout camp. This is in addition to a staff's official position.

All staff is required to be in camp from the beginning until the end of the camp session. If there is some extreme reason for which you have to leave camp, you must receive permission from the camp Director prior to the start of the session.

Please keep these important points in mind before you sign and submit this application. By sending us your application, we are assuming that you are aware of these points, and we are most grateful to your commitment.

Please complete the enclosed application. All applications **MUST** be accompanied by a picture. In addition, you must submit a copy of your insurance and prescription card and **TWO** letters of recommendation with your application. We will **NOT** process any application that lacks a picture, copy of insurance/prescription card, or recommendation letters. Please make sure to sign your application.

We look forward to spending a wonderful summer together!

Sincerely,

Rabbi Dov Whitman
Camp Director

Mrs. Aliza Koval
Assistant Director

Mailing Address 2100 Marlowe, 5th floor, Montreal, QC, Canada H4A 3L5
Phone (845) 371-2313 **Fax** (845) 371-2323 **Email** camp@yaldei.org
www.yaldei.org

Please indicate session for which you are applying:

Session 1 June 29 – July 19

Session 2 July 21 – August 9

Education History

	School Name	Major Subjects	Degree Granted
Graduate School			
College			
High School			
Other			
Currently Attending			

Work Experience

Employer	Job Description	Contact Person	Dates Employed	Reason for Leaving

Personal References (*List two references we can contact*)

Name of Reference	Organization	Phone Number

Please include two letters of recommendation

Personal Data & History

1. I am: (please check all that apply)

- A certified Lifeguard An EMT Red Cross / CPR / First Aid certified
 I speak other languages _____

2. Do you have skills in any of the following areas? (please check all that apply)

- Music Nature Arts & Crafts Drama
 Dance Sports Swimming Water Sports
 Expertise with camera & camcorder
 Special talents & hobbies _____

3. Have you ever worked for Yaldei? **No** **Yes** If yes, please describe in what capacity: _____

4. Have you ever worked with children or adults with developmental disabilities or any other special needs population? **No** **Yes** If so, please describe:

5. Have you ever been to camp before? **No** **Yes** In what capacity?

Do you have any medical or other special conditions that might be relevant to our summer programs? **No** **Yes** If yes, please describe: _____

Name of Physician: _____ Phone #: _____

Have you ever been convicted of any crime, including sex related or child abuse related offenses in any state or country? **No** **Yes**

Emergency Contact Information

Name _____ Relation _____ 24 hr phone _____

Address _____

Name _____ Relation _____ 24 hr phone _____

Address _____

Father's Name _____ Cell Phone _____

Home Address _____

Mother's Name _____ Cell Phone _____

Home Address _____

Please write a paragraph explaining why you should work at Camp Yaldei. Only use the space provided below.

I affirm that, to the best of my knowledge, the above information is true and accurate. I agree to notify Camp Yaldei of any information changes.

Signature of Applicant: _____ Date _____

Thank you for your interest in Camp Yaldei. If you have any questions you may contact camp@yaldei.org or call (845) 371-2313



JOB APPLICATION CHECK LIST

Your application will not be processed if missing any of the following items:

- A completed application form with your signature
- Copy of insurance card & prescription card
- Two letters of recommendation
- A current picture of yourself

Thank you for your interest in Camp Yaldei