

# Tennessee Baptist Adult Homes Special Friends Camp Staff Application

*send to:*

**Tennessee Baptist Adult Homes, Inc**  
**PO Box 728**  
**Brentwood, TN 37024-0728**  
 or email to: manderson@tnbaptist.org

TBAH Use Only	
Date Received:	
Receipt date/method:	
Copy sent to Staff Dir.	
References Sent:	

Identification				
Name		SS Number	Date of Birth	Application Date
Street Address		City, State, ZIP		T-Shirt Size
Home Telephone	Cell Phone	email address	Gender male <input type="checkbox"/> female <input type="checkbox"/>	Are you a US Citizen? Yes <input type="checkbox"/> No <input type="checkbox"/>

Employment History <i>(most recent first)</i>				
Name and address of company or individual		Phone	Dates Employed	May we contact? Yes <input type="checkbox"/> No <input type="checkbox"/>
What duties did you perform?				
Name and address of company or individual		Phone	Dates Employed	May we contact? Yes <input type="checkbox"/> No <input type="checkbox"/>
What duties did you perform?				

Education <i>(for the most recent school grade of college year completed, please provide the following)</i>				
Name of School, City, and State		Grade/Year	GPA	Major Course of Study
List any offices held, honors received, clubs, and organizations joined.				

References			
1 - Name (Pastor or other Minister)		Street, City, State, ZIP	
Daytime Phone	Home Phone	# years known	Name of Church
2 - Name		Street, City, State, ZIP	
Daytime Phone	Home Phone	# years known	Relationship
3 - Name		Street, City, State, ZIP	
Daytime Phone	Home Phone	# years known	Relationship

**Lifestyle Considerations**

You are applying for a position with Tennessee Baptist Adult Homes, Inc. of the Tennessee Baptist Convention (TBAH). The unique and special nature of TBAH requires all employees to manifest conduct and actions which project an image consistent with the expressed purpose and mission of TBAH. It is, therefore, imperative that employees favorably represent TBAH.

Conduct which brings embarrassment to TBAH or impedes its credibility with member churches and/or the general public is unacceptable. Conduct or other actions which are inconsistent with that normally expected of Tennessee Baptist denominational employees and other Christians is unacceptable. Similarly, conduct or other actions which are perceived as inconsistent are unacceptable. Examples of such conduct are; involvement with alcohol, illegal drugs, pre-marital sex or extra-marital sex, cohabitation apart from the marriage relationship, homosexuality and outside interests and pursuits which would normally be considered incompatible with TBAH's mission.

TBAH has not only the right, but also the responsibility to do everything possible to ensure that the stated purpose and mission of TBAH continues in its highest tradition and is not harmed or impeded by unacceptable behavior on the part of its employees.

Consistent with this purpose, TBAH's policy is to ensure that all applicant and employee behavior meets TBAH's standards of acceptable conduct. As a part of this policy, an individual's current and past conduct is subject to review. Therefore, please respond accordingly to the questions below. A "yes" answer may not automatically disqualify you from further consideration for employment. Please provide explanation for any "yes" responses so that individual consideration may be given. Use additional page(s) if necessary.

	<u>yes</u>	<u>no</u>
Do you currently use tobacco?	<input type="checkbox"/>	<input type="checkbox"/>
Do you currently use alcohol?	<input type="checkbox"/>	<input type="checkbox"/>
Do you currently use illegal drugs?	<input type="checkbox"/>	<input type="checkbox"/>
Have you ever been fired or otherwise asked to leave a job?	<input type="checkbox"/>	<input type="checkbox"/>
Have you ever been convicted of a misdemeanor or felony?	<input type="checkbox"/>	<input type="checkbox"/>
Have you ever been convicted of child abuse or any crime involving a minor?	<input type="checkbox"/>	<input type="checkbox"/>
Do you have any mental or physical limitations that would impede the satisfactory performance of your duties?	<input type="checkbox"/>	<input type="checkbox"/>

In this space, please describe what attracted you to Special Friends Camp, any experience you have in working with individuals with special needs, and any interests or skills you have that you feel may assist you as a staff member. Include how you learned about Special Friends Camp.


**IMPORTANT!!** Special Friends Camp requires lifting/transferring campers with physical handicaps into and out of wheelchairs, beds, showers, etc. Though you will never be required to do such lifting alone, you will be required to assist with such lifting several times every day while at camp. If there is any reason why you are unable to fulfill this element of SFC work, please use this space to explain. Otherwise, please write "None."


## Affirmation and Signature

By my signature placed below, I affirm that the information provided in this employment application is true and complete. I understand that if employed, any false information or omissions shall be considered sufficient cause for dismissal without any obligation or liability to me other than for payment, at the rate agreed upon, for services rendered. I agree to immediately notify TBAH if I should be convicted of a felony or any crime involving dishonesty or breach of trust while my application is pending or during my period of employment.

I authorize the investigation of all statements contained in this application. I also authorize TBAH to contact my present employer (unless otherwise noted in this application form), past employers and listed references and other references that might know of my qualifications for employment.

I authorize any person, school, current employer (except as previously noted), past employers and organizations who might know of my qualifications for employment to provide TBAH relevant information and opinion that may be useful to TBAH in making a hiring decision, and I release such person and organizations from any legal liability in making such statements.

I understand that after a conditional job offer has been extended to me, I may be given a drug/alcohol test. My signature on this application gives consent for this drug/alcohol test.

I understand and agree that, if hired, I may be required to submit to a drug/alcohol test if TBAH determines such test to be necessary. I also understand and agree that, if hired, I may be required to submit to a search of my personal property if TBAH determines it has a reasonable suspicion of theft or of possession of drugs, alcohol, weapons, or stolen property on the property of TBAH and the Tennessee Baptist Convention.

I understand that this application does not create a contract of employment. I understand and agree that, if hired, MY EMPLOYMENT IS FOR NO DEFINITE PERIOD OF TIME and may, regardless of the date of payment of my wages or salary, BE TERMINATED AT ANY TIME. I understand that NO PERSON IS AUTHORIZED TO CHANGE ANY OF THE TERMS IN THIS APPLICATION FORM.

*Please review the above items carefully before signing*

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

## Parental Endorsement for Minor Applicants

Has the applicant reached 18 years of age?      yes                      no  
                                     

If no, parent/legal guardian must read the following paragraphs and sign indicating their endorsement of this application.

For many young people, staff service with the Special Friends Camps will be the longest length of time they have been away from home. However, this experience will give them the opportunity to grow mentally, physically, and spiritually. It is hoped that they gain mature work habits which will benefit them for a lifetime. It is a rewarding time, but also a demanding time. Each staff member will be closely supervised. Each staff member is expected to become a valuable member of the team and perform all duties as assigned.

Please sign below to indicate that you have reviewed and agree with this application and the answers given, that you consent to any examination and/or testing (including drug/alcohol testing) of your child that may be required. Your signature indicates that your child has your consent to serve on the staff of Special Friends Camp and that you offer your prayerful support in this endeavor. Your signature attests you are aware that you will be required to sign additional forms and that transportation to and from camp is the responsibility of the applicant and his/her family.

\_\_\_\_\_  
Signature - Father

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature - Mother

\_\_\_\_\_  
Date

\_\_\_\_\_  
Address of Parent/Legal Guardian