



Attach Photo
(Required)

CAMP NURSE WEB APPLICATION

Return to: 2689 Highway 39, Hunt, TX 78024 (830) 238-4660

Full Name _____ Name Used _____

Home Address _____ City _____ St _____ Zip _____ Ph # _____

Cell # _____ Date-Of-Birth _____ Age _____ Religion _____

Email _____ College Name _____ Major _____

College Address _____ City _____ St _____ Zip _____ Ph # _____

Circle: Freshman / Sophomore / Junior / Senior Social Security # _____ Sorority _____

Have you attended Camp Mystic before? _____ Who told you about Mystic? _____

Other camps attended or employed by _____

NURSING QUALIFICATIONS

1. Are you a(n) (please circle): STUDENT NURSE LVN RN

2. List hospitals or medical facilities where you have worked or trained. _____

3. Name of the Nursing School you attended or currently attend: _____

4. Have you had any experience caring for children? If so, describe and list the name of the institution, age of the children, type of care, etc.

5. Have you had any experience in emergency care? If so, please describe this experience.

6. Have you ever worked at a camp facility as a nurse? If so, please describe this experience.

CHECK THE TERM (OR TERMS) YOU WISH TO SERVE AS A NURSE (PLEASE SEE TERM DATES ON WEBSITE):

First Term
Five Weeks _____
(Includes orientation)

Second Term
Five Weeks _____
(Includes orientation)

Third Term
Two Weeks _____
(Includes orientation)

Please give at least 3 names and full addresses with zip codes and phone numbers as references: a teacher, a resident of your community, head nurse of a hospital, or an employer.

NAME	ADDRESS	PHONE #	OCCUPATION
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_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

I give Camp Mystic my permission to check my references and my background. _____
Signed _____ Date _____

We are dedicated to creating a healthy environment for our campers and employees. To help us accomplish this goal at Camp Mystic, we need nurses who are dedicated toward this objective. Please circle the word which best describes YOUR personal views on the following subjects (indicate how YOU stand and NOT the way you feel toward others):

1. DRINKING ALCOHOLIC BEVERAGES – A. Avoid B. Sinful C. Acceptable for others only
D. OK if of age E. Completely acceptable COMMENT _____
2. SMOKING -- A. Avoid B. Sinful C. Acceptable for others only D. Completely acceptable
COMMENT _____
3. ILLEGAL DRUGS -- A. Avoid B. Sinful C. Acceptable for others only D. Completely acceptable
COMMENT _____
4. HOMOSEXUALITY -- A. Avoid B. Sinful C. Acceptable for others only D. Completely acceptable
COMMENT _____
5. TATTOOS & BODY PIERCING – A. Avoid B. Acceptable for others only C. Completely acceptable
COMMENT _____

Have you ever been arrested? _____

Camp Mystic has a no smoking policy on campgrounds. Will you be able to comply? _____

You will not be allowed to consume alcoholic beverages on or off the campgrounds while on contract. Will you be able to comply with this policy? _____

What honors have you received while in schools or camps? _____

What role has Christianity played in your life? _____

If you are hired and sign a contract this spring, do you consider your signature and word binding? _____

What circumstances may prevent you from fulfilling a contract? _____

****PLEASE ATTACH A COPY OF YOUR NURSING LICENSE TO THIS APPLICATION!****