



# Christmount

222 Fern Way, Black Mountain, NC 28711

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The Conference Center for the Christian Church (Disciples of Christ)

## 2010 Camp Lakey Gap Staff Application

Please answer in plain type.  
Use another sheet if necessary.

Full Name: \_\_\_\_\_ Nickname: \_\_\_\_\_  
 Home Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 College Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Cell Phone: (    ) \_\_\_\_\_ Home Phone: (    ) \_\_\_\_\_  
 College Phone:(    ) \_\_\_\_\_ E-mail address: \_\_\_\_\_  
 Driver's License Number: \_\_\_\_\_ State: \_\_\_\_\_ expires: \_\_\_\_\_  
 College: \_\_\_\_\_  
 Year in school:      1      2      3      4      Graduate School    1      2  
 Major: \_\_\_\_\_ Minor: \_\_\_\_\_  
 Area of professional interest: \_\_\_\_\_  
 List any relevant workshops or seminars you have attended: \_\_\_\_\_

### Employment Experience:

Name of Employer: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Contact name: \_\_\_\_\_ Phone: (    ) \_\_\_\_\_  
 Job Title: \_\_\_\_\_ Dates of Employment: \_\_\_\_\_  
 Why you left job: \_\_\_\_\_

Name of Employer: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Contact name: \_\_\_\_\_ Phone: (    ) \_\_\_\_\_  
 Job Title: \_\_\_\_\_ Dates of Employment: \_\_\_\_\_  
 Why you left job: \_\_\_\_\_

### Camp Experience:

Name of Camp: \_\_\_\_\_  
 Camper     Staff      Years in attendance: \_\_\_\_\_

Name of Camp: \_\_\_\_\_  
 Camper     Staff      Years in attendance: \_\_\_\_\_

Please describe your understanding of autism spectrum disorders:

Describe your experience teaching or working with the following areas:

Communication and Language:

Self Care Skills (bathing, eating, dressing, and toileting):

Social Skills:

Describe your experience working with individuals with communication impairments:

Describe your understanding or experience with behavior management techniques and explain specific behaviors that you have worked with:

Please write a statement explaining why you want to work with individuals on the autism spectrum:

Have you been convicted of a crime or do you have criminal charges pending?  Yes  No  
If so, please describe. (This information will be reviewed for job relatedness and time since last conviction.)

References

- Please include at least one work reference. The other can be a professor, but do not list relatives or friends.
- Attached to this e-mail is a reference form file. Print a copy or e-mail the file to each reference. References are to e-mail the completed form to [elsa.berndt@yahoo.com](mailto:elsa.berndt@yahoo.com) or mail to: Elsa Berndt  
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Reference 1:

Name: Phone Number: (    )  
Title:  
Address:  
Email:  
Relationship: Years known:

Reference 2:

Name: Phone Number: (    )  
Title:  
Address:  
Email:  
Relationship: Years known:

Email this form as an attachment in "Word" to: [elsa.berndt@yahoo.com](mailto:elsa.berndt@yahoo.com).

*Thank you for your application!*  
Elsa Berndt, Camp Lakey Gap Director