



2023 RVRN Work Experience Program

Trainee application questions

2023 RVRN Work Experience Program in partnership with the

A/U Ranches, Buena Vista, CO

Trainee Application

Thank you for your interest in this unique work experience.

Before completing this application, please read the job description and expectations that are available by clicking [here](#).

The following application will take approximately 20 – 30 minutes to finish and needs to be completed in one session.

Applicant Information

Name

Email

Address

Phone number (if applicable)

Job skills

Trainees in this year's program will serve as the Lodge Crew at the A/U Ranches in Valerie Lodge during Family Camp Week 1 and Week 2 (June 20 – July 6), and will either be placed on the dish crew or on the lodge crew based on their skills and interest levels.

The full job description and expectations for each crew can be found on the "Work Experience Program" page of our website by clicking [here](#).

Please share any work or volunteer experiences you have had.

What special skills and characteristics would you bring to the workplace?

If we were to ask someone who knows you well to share what qualities best describe you, what would they say?

Are there any work tasks or chores done at home that are particularly challenging for you? What's the hardest task or chore? Your response to this question will help guide us in the best ways to provide support.

Please share your level of independence (One-on-one assistance needed, Some assistance needed, or (Mostly) Independent) on the following:

- Self-care (i.e. showering, toileting, shaving, dressing/undressing)
- Laundry
- Downtime (i.e. during a break I can independently walk to my cabin and back to the lodge to meet the group without wandering off)
- Making friends
- Telling time
- Following a schedule
- Following multi-step directions
- Food and beverage management
- Overnight care (toileting)
- Overnight care (sleeping through the night)
- Emotion management/self-regulation

What skills are you interested in learning and developing?

This is a paid position; however, we understand that for some individuals getting paid might interfere with benefits you currently receive. Please indicate your preference below.

- I prefer to get paid.
- I prefer to be unpaid.
- Unsure at this time.
- Other

Please indicate your t-shirt size. Sizes range from Youth Small to Adult 2XL

Is there anything else you'd like us to know or consider?

Care and Emergency Contact Information

We welcome all students of Christian Science, without judgment, wherever they are in their journey toward reliance on prayer-based healing. The A/U Ranches is a place of healing and growth at which prayer is the first and primary means of care for the campers and staff. The on-site Christian Science Care Facility is staffed full-time by a Christian Science practitioner and Christian Science nurse.

Do you have any dietary restrictions or preferences (i.e. vegetarian, vegan, etc...) that we should know about?

Do you have any health conditions or needs we should be aware of?

If you answered "yes" to any of the questions above, please explain anything you would like us to know to better prepare and help care for you.

.....

Medications: The Christian Science care providers at the A/U Ranches do not dispense medicine, and per ACA requirements, prescription and over-the-counter medicines must be kept under lock, except when under the control of a parent/caregiver managing this.

I will not bring any medications to camp.

I will complete the Medication Authorization form (to be sent in a follow-up email) so that you can be notified of all American Camp Association drug policies.

I'd like to have a conversation about this with the RVRN Program Director.

Permission to Treat:

A. I authorize and request the A/U Ranches in cases of health emergency to make any and all appropriate and reasonable health treatment decisions. I understand this may include but is not limited to engaging a Christian Science practitioner, engaging a Christian Science nurse, being admitted into the camp's Christian Science care facility, providing first aid/CPR, contacting emergency medical services, providing emergency transportation, and being admitted into a clinic or hospital. I understand that every effort will be made to reach the emergency contact as soon as possible. However, if deemed necessary before contact can be made, I also grant permission to receive such emergency care.

B. I refuse to authorize any form of medical treatment beyond what is required by state law, and I release the A/U Ranches from all liability.

If you answered "B" to the previous question: Please specify any actions that you authorize to be taken. (This follow-up question is an American Camp Association requirement for participants who refuse medical treatment.)

Primary contact in the unexpected case of an emergency

Primary emergency contact's relationship to you

Primary emergency contact phone number

Secondary contact person if primary contact cannot be reached in the unexpected case of emergency

Secondary emergency contact relationship to you

Secondary emergency contact phone number

Multimedia Photo Release Agreement

Rainbow Valley Resource Network and the A/U Ranches reserve the right to use photos, video footage, and/or footage of staff, adult participants, and guests from RVRN- and A/U Ranches-funded activities in printed and electronic publications.

This agreement grants Rainbow Valley Resource Network and the A/U Ranches the right to publish, distribute, and share such images as described above for the following uses:

- Print

- Electronic media, including publications in PDF format, Websites and Social Media
- Audio/Video
- Promotional Uses (without attributions)

Submitted images of participants become the property of Rainbow Valley Resource Network and the A/U Ranches and are not to be shared by the signee with other organizations for commercial use without RVRN's or A/U's explicit written consent.

*Rainbow Valley Resource Network and the A/U Ranches reserve the right to modify such images, at its discretion. This agreement also authorizes RVRN and the A/U Ranches to store images internally for future reference and reuse.

*It is our policy not to credit individuals whose images and/or fruitage have been submitted for use in these publications, unless specifically requested and authorized. All shared images shall be the original work of the signee and are not to violate any copyright, contract, or other property rights of any person or organization.

*Such images can be used for personal and professional portfolio purposes. Acceptance of this policy is assumed unless otherwise communicated in writing to Rainbow Valley Resource Network and the A/U Ranches. It is the responsibility of participants, guests, or their legal guardians/conservators/caregivers to submit, in writing, exclusion from all multimedia/photo publications.

I have read and agree to the Multimedia and Photo Release Agreement.

Please exclude me from all multimedia/photo publications.

Parent/Caregiver Information

Name

Email

Parent phone number

Please have a parent/guardian sign below to indicate they have reviewed and agree with the information that has been shared on this application.

Date