

Contents of Internship Packet Camp Au Sable Internship Program

Application Form - To be completed before starting internship.

Internship Agreement - To be completed by mentor before the internship begins and after discussing details/planning with a potential intern. This plan is subject to change with approval from Camp Administrative Committee.

Weekly Report - To be completed by interns, reviewed by mentor and turned in to office the following week. The purpose of this report is not to make sure you are “working hard enough”, it is to record what you have accomplished, so that we can be sure to provide a complete and supportive final summary of what you have accomplished and so that Camp Administrative Committee can ensure quality mentorship.

Quarterly Evaluation - To be completed by intern and mentor and turned into the office (Due Dec 1, Mar 1, June 1). This is the best time to discuss and adjust goals set forth in the Internship Agreement.

Exit Strategy Plan - To be completed by intern and mentor - due by the time the internship is 2/3 completed. We want you to have a clear plan when you finish your internship.

Final Summary - Due before the intern leaves. This takes the place of the last quarterly report.

Instructions for Mentor’s Letter of Recommendation – To be completed by mentor and signed by the director before intern leaves.

**Application Form
Camp Au Sable Internship Program**

Applicant's Name: _____

Address: _____

Phone number: _____ Email: _____

Date of Birth: _____

Citizenship: _____ If not USA, what visa status do you have? _____

Social Media Identity: _____

Check all that apply: Male _____ Female _____ Married _____ Single _____ Divorced _____

Religious Affiliation: _____ Baptized: _____

Driver's License number: _____ State: _____

Educational Experience:

Year graduated from High School: _____ Name of School: _____

Number of years attended College: _____ Name of College: _____

Undergraduate degrees and major (if completed): _____

Number of years attended Graduate School: _____ Name of University: _____

Graduate degrees (if completed): _____

List any other certificates/licenses earned (i.e. CPR, trades, CDL, lifeguard, ETC, high adventure)

Previous Work Experience:

Employer: Type of work: Dates employed: Supervisor:

Service/Volunteer Record: (include church and non-religious activities)

Organization	Your Role	Length of Service
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Health Record:

List any known allergies:

List any physical conditions/illness that might hinder you from certain activities:

Immunizations (list all that you have):

Hobbies and interests (include music skills if any):

Internship Position applying for (indicate first and second choice):

- _____ Housekeeping
- _____ Kitchen
- _____ Maintenance
- _____ Nature Center

On a scale of 0-3 indicate your level of interest and your level of experience.

0 = none, 1 = some, 2 = quite a bit, 3 = a lot!

Interest	Activity	Experience
0 1 2 3	Cooking	0 1 2 3
0 1 2 3	Cleaning	0 1 2 3
0 1 2 3	Mechanical	0 1 2 3
0 1 2 3	Working with wood	0 1 2 3
0 1 2 3	Electrical	0 1 2 3
0 1 2 3	Plumbing	0 1 2 3
0 1 2 3	Painting	0 1 2 3
0 1 2 3	Nature	0 1 2 3
0 1 2 3	Teaching	0 1 2 3
0 1 2 3	Horses	0 1 2 3
0 1 2 3	Driving large machinery	0 1 2 3
0 1 2 3	CLD driving	0 1 2 3
0 1 2 3	Office/clerical	0 1 2 3
0 1 2 3	Graphic Design	0 1 2 3
0 1 2 3	Marketing	0 1 2 3
0 1 2 3	IT	0 1 2 3
0 1 2 3	AV	0 1 2 3
0 1 2 3	Public Speaking	0 1 2 3
0 1 2 3	Mission work	0 1 2 3
0 1 2 3	Evangelism/outreach	0 1 2 3
0 1 2 3	Working with children	0 1 2 3

In the space below, tell us why you would like to be an intern at Camp Au Sable. Include how you think this internship would help you achieve your long term goals. (You may attach a document if you wish)

Internship Agreement
(to be filled out by mentor and signed by intern)
Camp Au Sable Internship Program

Intern Name: _____

Internship Position: _____

Mentor's Name: _____

Dates of Service: _____ Date Exit Plan is due: _____

Monthly remuneration: \$400

Usual Day off (subject to change as needed): _____

Housing arrangements: _____

Names of roommates: _____

Vehicle assignment (if applicable): _____

Using the space below, list and describe specific goals and list activities/responsibilities that are being planned for this internship (these are subject to revision with approval of the Camp Administrative Committee). Indicate seasonal changes that are planned (i.e. summer camp duties may be different). Use additional pages as needed or attach a document.

Goals:

Activities/responsibilities:

Please initial the following:

_____ I have read the internship guidelines.

_____ I agree to submit weekly reports and meet deadlines for evaluations contained in this packet.

_____ I understand that I may need to help out in other areas of camp as needed, beyond what is indicated in the internship agreement above.

_____ I understand my remuneration will be paid monthly and that it is subject to taxes.

_____ It is my desire and commitment to conduct myself in a Christ-like way as taught by the Bible and the Spirit of Prophecy. I understand that Camp Au Sable is owned and operated by the Seventh-day Adventist Church, I agree to live in harmony with the church's teachings. I will contribute to the mission of a local Seventh-day Adventist Church congregation by regular church attendance, giving a faithful tithe, and volunteering where possible.

Intern's Signature: _____ Date: _____

Mentor's Signature: _____ Date: _____

Director's Signature: _____ Date: _____
(Director's signature indicates Camp Administrative Committee has reviewed this agreement)

Internship Weekly Report Camp Au Sable Internship Program

Name: _____ Week Ending: _____

Indicate what tasks you did and when you did them related to your internship.

Time	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Sabbath
6:00							
7:00							
8:00							
9:00							
10:00							
11:00							
12:00							
1:00							
2:00							
3:00							
4:00							
5:00							
6:00							
7:00							
8:00							
9:00							
10:00							
11:00							

Additional notes:

List internship activities that you particularly benefited from:

List internship activities would you like to try in the future:

List specific things you as an intern feel you should improve on:

Do you feel your mentor was involved enough? Too much? Explain.

List the social activities you participated in beyond your specific internship activities: (i.e. had lunch with resident staff, play night with kids)

List any spiritual activities you participated in beyond your specific internship activities: (i.e. church, camp programs, off camp activities)

List any service activities you participated in beyond your specific internship activities: (i.e. church, camp programs, off camp activities)

Remember: The purpose of this report is not to make sure you are “working hard enough”, it is to record what you have accomplished so that we can be sure to provide a complete and supportive final summary of what you have accomplished and so that Camp Administrative Committee can ensure quality mentorship.

Intern’s Signature: _____

Mentor’s Signature: _____

**Quarterly Evaluation
Camp Au Sable Internship Program**

Name: _____ Report Due Date: _____

The intern is asked to complete this evaluation in consultation with the mentor. Use your weekly reports to remind you of all you have accomplished and to roughly calculate the time spent as they pertain to your original goals. The mentor will discuss/edit the evaluation before signing. (You can attach a word document if you wish). Camp Administrative Committee will review this evaluation when complete.

List the individual goals from the original internship agreement and comment on how the goals have been met, or partially met, and how you plan on completing/meeting them in the future. Include any additional goals that you would like to add to your internship agreement.

List the completed activities/tasks from the original internship agreement:

Which specific activities/tasks are you planning to complete this next quarter? Are there others you would like to add?

Rate your work this quarter (your mentor will review your ratings): 1 poor, 2 weak, 3 ok, 4 good, 5 excellent

- _____ Attitude at work.
- _____ Attitude outside of work.
- _____ Punctuality
- _____ Efficiency on the job
- _____ Quality of product
- _____ Appearance and cleanliness as appropriate for the task
- _____ Knows when to seek advice and when to work independently.

What do you feel has been your most important contribution during this quarter?

What has been the most important personal skill/experience that you have gained during this quarter?

What has been your weakness this quarter and what are you planning to do to improve?

How has your personal life (spiritual/social) been impacted by being an intern?

Suggestions you have on how to improve the internship program:

Additional Comments by Mentor:

Intern's Signature: _____ Date: _____

Mentor's Signature: _____ Date: _____

Director's Signature: _____ Date: _____

(Director's signature indicates Camp Administrative Committee has reviewed this evaluation)

**Final Evaluation
Camp Au Sable Internship Program**

Name: _____ Position: _____

The intern is asked to complete this evaluation in consultation with the mentor. Use your weekly and quarterly reports to remind you of all you have accomplished and to roughly calculate the time spent as they pertain to your original goals. The mentor will discuss/edit the evaluation before signing. (You can attach a word document if you wish). Camp Administrative Committee will review this evaluation when complete.

List the specific goals that were accomplished during your internship.

List specific activities/tasks that you accomplished and calculate the hours you spend on these (from your weekly reports)

Rate your work this past year (your mentor will review your ratings): 1 poor, 2 weak, 3 ok, 4 good, 5 excellent
Indicate where there was improvement over the year with an asterisk and use the space below to explain.

- _____ Attitude at work.
- _____ Attitude outside of work.
- _____ Punctuality
- _____ Efficiency on the job
- _____ Quality of product
- _____ Appearance and cleanliness as appropriate for the task
- _____ Knows when to seek advice and when to work independently.

What do you feel has been your most important contribution to camp?

What has been the most important personal development that you have gained during this quarter?

Explain how your spiritual walk has been affected by camp?

Additional Comments by Mentor:

Intern's Signature: _____ Date: _____

Mentor's Signature: _____ Date: _____

(Mentor's signature indicates that the mentor has reviewed this report with the intern and written a detailed letter of recommendation, which includes details of the specific activities/tasks listed in the quarterly reports and final summary that has been provided to the intern.)

Director's Signature: _____ Date: _____

(Director's signature indicates Camp Administrative Committee has reviewed this evaluation AND that a detailed letter of recommendation, which is based on the goals included in the original agreement and quarterly reports and has been provided to the intern)

**Guidelines for Letter of Recommendation
Camp Au Sable Internship Program**

1. Begin with a standard, formal letter-writing style. Address the letter to “To whom it may concern”.
2. Introduce yourself, including your qualifications and how you know the candidate, and for how long.
3. Explain why you think the candidate will be effective, productive workers.
4. List specific skills/activities the intern has considerable experience. Indicate other experiences but make sure you don’t overstate their skill level.
5. Give a personal testimony and why they will be a great addition.
6. Since this is a general recommendation, indicate that you are available for further specific recommendations.
7. Write a formal business closing and sign your name.