



# EWALU BIBLE CAMP

37776 Alpha Avenue, Strawberry Point, IA 52076 • Website: [www.Ewalu.org](http://www.Ewalu.org)  
Phone: 563-933-4700 • Email: [community@ewalu.org](mailto:community@ewalu.org)

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*"In the rhythm of Christian life, Ewalu serves as a place apart  
to connect the Word of God with the world of God."*

Dear Applicant,

2018

We are pleased to hear about your interest in the Leadership Training (LT) program at Ewalu! The LT program is designed to help you develop skills for effective ministry. You'll also gain leadership tools to use in your home congregation, school, community, and future careers.

The program is for youth completing grades 10-12. Each four-week session progresses from developing leadership skills to using them under the guidance of a summer staff member with younger campers. You will be interacting with younger campers during games, at the camp store, at the pool, at campfires, and many other times at camp. Each day, your LT group also spends time growing as a community with Bible studies, discussions and workshops on a variety of topics.

The program is led by a qualified and experienced Ewalu staff member. The LT Coordinator conducts many of the trainings and organizes activities. Other camp staff and resource people will also contribute to your experience.

Each summer we offer two LT sessions. This year, Session 1 is June 10-29 and July 8-13. Session 2 is July 15 – August 10. Please indicate on your application form which sessions are your first and second choices of dates. Participation is limited to one session each summer.

Enclosed you will find an application and two reference forms. Please return the application to Ewalu as soon as possible. Give your reference forms to adults such as pastors, teachers or employers, who know your character and are not related to you. It may be helpful to put your name on the reference forms before you give them out. Please ask each person to complete the form and mail or email it directly to Ewalu.

At Ewalu, there is no charge for participation. LT participants receive a small stipend of \$25/week plus room and board. The camp week typically begins at noon on Sundays and ends with a closing program on Fridays at 2 p.m. Weekends are time off, during which participants often return home. Weekends are not supervised by the LT coordinator or other Ewalu staff.

If you have any questions, please call or email me. The program is limited to twelve people each session. Acceptance is based on qualifications, ability to attend the entire session, and timeliness of your application.

Thank you again for your interest! The LT program is a powerful way to practice and expand your abilities in ways that improve our world and strengthen the Church. We hope to serve God with you at Camp Ewalu this summer!

In Christ,

Jesse Klosterboer  
Associate Director for Development and Program

# Ewalu Bible Camp

37776 Alpha Avenue, Strawberry Point, IA 52076  
563-933-4700 community@ewalu.org

## Leadership Training Application 2018

**Please indicate your first and second (if possible) choice of dates:**

- Session I: June 10-29 and July 8-13  
 Session II: July 15 – August 10

### Personal Information

**Please fill in all information:**

Name \_\_\_\_\_ Current Grade \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Home Phone \_\_\_\_\_ Cell \_\_\_\_\_ Email \_\_\_\_\_  
Home Church & City \_\_\_\_\_ Pastor \_\_\_\_\_  
High School \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

Have you ever been convicted of a crime? Yes ( ) No ( )

Have you been convicted of any crime involving children? Yes ( ) No ( )

If you answered Yes to either of the above questions, please explain: \_\_\_\_\_

### Family Information

**Please provide us with the appropriate information:**

Father's Name \_\_\_\_\_ Phone(s) \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Mother's Name \_\_\_\_\_ Phone(s) \_\_\_\_\_  
Address (if different) \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Stepmother's Name \_\_\_\_\_  
Stepfather's Name \_\_\_\_\_

**Other Emergency Contact:** (not a person listed above)

Name \_\_\_\_\_ Phone(s) \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Relationship \_\_\_\_\_

## Employment/Volunteer Work

### ***Please tell us about your last two paid positions of employment:***

Business \_\_\_\_\_ Phone \_\_\_\_\_

Supervisor Name \_\_\_\_\_ Job Title \_\_\_\_\_

Your Duties \_\_\_\_\_

Dates of Employment \_\_\_\_\_ / \_\_\_\_\_ to \_\_\_\_\_ / \_\_\_\_\_  
mo yr mo yr

Business \_\_\_\_\_ Phone \_\_\_\_\_

Supervisor Name \_\_\_\_\_ Job Title \_\_\_\_\_

Your Duties \_\_\_\_\_

Dates of Employment \_\_\_\_\_ / \_\_\_\_\_ to \_\_\_\_\_ / \_\_\_\_\_  
mo yr mo yr

### ***Please tell us about your last two volunteer positions that you held:***

Organization's Name \_\_\_\_\_ Phone \_\_\_\_\_

Supervisor Name \_\_\_\_\_ Average hours per week \_\_\_\_\_

Your Duties \_\_\_\_\_

Dates \_\_\_\_\_ / \_\_\_\_\_ to \_\_\_\_\_ / \_\_\_\_\_  
mo yr mo yr

Organization's Name \_\_\_\_\_ Phone \_\_\_\_\_

Supervisor Name \_\_\_\_\_ Average hours per week \_\_\_\_\_

Your Duties \_\_\_\_\_

Dates \_\_\_\_\_ / \_\_\_\_\_ to \_\_\_\_\_ / \_\_\_\_\_  
mo yr mo yr

## Camping History/Interest & Hobbies

### ***Please tell us about your camping history:***

Have you ever attended an overnight summer camp? Yes ( ) No ( )

Camp Name \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Year(s) \_\_\_\_\_

Camp Name \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Year(s) \_\_\_\_\_

Have you ever been a member of a camp staff? Yes ( ) No ( )

Camp Name \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ # Weeks \_\_\_\_\_

Position \_\_\_\_\_ Duties \_\_\_\_\_

### ***Please tell us about your interests and hobbies:***

Favorite interests, hobbies, or activities you enjoy. \_\_\_\_\_

\_\_\_\_\_

## References

***Please list two professional people to serve as your references. One should be your pastor or youth director and none should be family members. Ask your references to fill out and send the provided forms directly to Ewalu.***

Name \_\_\_\_\_ Phone \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_ Zip \_\_\_\_\_  
Relationship \_\_\_\_\_

Name \_\_\_\_\_ Phone \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_ Zip \_\_\_\_\_  
Relationship \_\_\_\_\_

## Questions

We desire that Ewalu have a faithful and welcoming Christian atmosphere and influence. Campers come from a variety of religious backgrounds. However, all are included in worship, prayers, devotions and Bible study activities. Leadership Training participants lead campers in faith-related activities and are expected to live as role models to campers and to the staff. In applying to the Leadership Training program, you subscribe to high moral, ethical and spiritual goals, and you give us your assurance that you will try to lead others to practical faith in Jesus Christ. To help us better understand your Christian approach to ministry, please answer the following questions. **Please write or type your answers on a separate sheet of paper.**

1. What does it mean to you to be *called* to something in your life? Why do you feel you may be called to do outdoor ministry at Ewalu?
2. How is your life today different because of your faith in God?
3. What excites you about the LT program? What do you think may be your biggest challenge?
4. What strengths will you bring with you to the summer community at Ewalu? What are some areas in which you would like to grow?

## Ewalu Mission Statement

***“In the rhythm of Christian life, Ewalu serves as a place apart to connect the Word of God with the world of God.”***

## Our Expectation of Applicants

Obedience to Christ is the key to camping ministry. The commitment, humility, and verbal witness of LT Participants can contribute greatly to young campers' openness and responsiveness to the work of the Holy Spirit through the Gospel.

It is essential that you as an LT applicant are willing to:

- Share your life in Christ by being an example in serving Ewalu campers and staff
- Enter into responsibilities and relationships with a positive and supportive attitude
- Sacrifice your personal desires in the interest of the campers and your peers

Ewalu Bible Camp prohibits the use of alcohol, tobacco and drugs on camp property or while representing camp. The abuse of any such substance is cause for immediate dismissal.

## Applicant's Agreement with Ewalu Bible Camp

If I am accepted to the Leadership Training program, I will abide by the statements above and the principles of ethics, conduct, and dress asked of me, and I will accept my proper responsibility as a member of the camp community.

I realize and allow that any photos or recordings taken of me during the summer may be used in the camp's promotional materials.

In signing this application, I hereby release all previous employers and/or references to furnish my records, reasons for leaving and all information they may have concerning me. I hereby release them from all liability or damage arising therefrom. In signing this application, I am also saying that all information within this application is true. In the event of my acceptance, I shall be subject to dismissal if I have given false or incomplete information within this application.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent's Signature and Approval (if applicant is under 18)

\_\_\_\_\_  
Date

*Please return your completed application to:*

Attn: Jesse Klosterboer, Ewalu Bible Camp, 37776 Alpha Ave., Strawberry Point, IA 52076

or scan and email to [community@ewalu.org](mailto:community@ewalu.org)

# Ewalu Bible Camp

## Leadership Training Reference Information

Please return completed form to:

**Attn: Jesse Klosterboer**  
**Ewalu Bible Camp**  
**37776 Alpha Avenue**  
**Strawberry Point, IA 52076**

Phone: 563-933-4700 Website: [www.Ewalu.org](http://www.Ewalu.org) Email: [community@ewalu.org](mailto:community@ewalu.org)

The person listed below is requesting that you evaluate his or her suitability to be a participant in our Leadership Training Program. This form will be used with confidentiality and only by people involved in the selection process.

Name of Applicant: \_\_\_\_\_

Name of person submitting Reference: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

How long have you known the applicant? \_\_\_\_\_

What is your relationship to the applicant? \_\_\_\_\_

Please rank the applicant in the following areas using the scale below:

0	1	2	3	4	5
Unable to Evaluate	Very Low	Low	Okay / Average	High	Extraordinary

- |   |   |
|---|---|
| ___ Maturity                            | ___ Involvement in congregation               |
| ___ Responsibility                      | ___ Leadership ability                        |
| ___ Personable                          | ___ Leadership experience                     |
| ___ Personal faith                      | ___ Flexible; able to adapt to new situations |
| ___ Openness to critique                | ___ Experience working with children/youth    |
| ___ Relates well with peers his/her age | ___ Able to work as a part of a team          |

**Please share your insights regarding the applicant in the following areas. If you are unable to respond in a given area, please note.**

1. What do you see as the applicant's greatest gifts?
2. Share what you can about the applicant's experience and ability to work with children, youth and adults.
3. Would you be willing to have your own children under the applicant's supervision for a week in a camp situation? If not, why?
4. Is the applicant able to share his or her faith with others through devotions, worship and Bible study?
5. What concerns do you have about the applicant's ability to serve as a member of the Ewalu Leadership Training Program?
6. To your knowledge, does the applicant have any tendencies toward child or sexual abuse?
7. Your overall evaluation of the applicant and his/her suitability for this position:

Other comments:

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*Thank you for your time!*

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Other comments:

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*Thank you!*