

**Student Volunteer Application
Kennedy Heights Arts Center
2020 Summer Camps**

Name: _____
 Last First

Address: _____
 Street Address City State Zip

_____ Home Phone # Cell phone #

_____ Email address

Date of Birth: _____

School: _____

Entering Grade in 2020-2021: _____

Name of Parent(s)/Guardian(s) Work Phone # Home Phone# Cell Phone #

Have you volunteered with the Kennedy Heights Arts Center Summer Camps before?
___ yes ___ no

If so, when? _____

Which camp(s)? _____

This summer, we are seeking energetic, responsible student volunteers, ages 14 – 18, to serve as Art Camp Assistants on our summer camp program from 9:00am – 3:00pm daily. Summer Camp runs for 10 weeks. You are welcome to volunteer for one or more weeks. **For scheduling purposes, please indicate ALL of the weeks that could work for you.**

*Indicate which camp session(s) you would be available to work:

- June 1 - 5
- June 8 - 12
- June 15 - 19
- June 22 - 26
- June 29 - July 2 (4 day camp)
- July 6 - 10
- July 13 - 17
- July 20 - 24
- July 27 - 31
- August 3 - 7

Check this box if you are interested in volunteering for Extended-Care. *This program runs from 2:30 – 5:30pm every day after camp. You'll help prepare snack for the campers, play indoor and outdoor games, watch movies, and lead art activities. You can select how many days you would like to volunteer.*

***Essay** - Please write a brief essay on the following question in the space provided below:
Why are you interested in volunteering at the Kennedy Heights Arts Center, and what do you hope to gain from the experience?

All volunteers are required to attend an orientation training. Please indicate which Orientation date would work best for you:

- Saturday, May 9th from 1:00 – 2:30 pm
- Tuesday, May 16th from 6:00 – 7:30 pm

References: FOR NEW VOLUNTEERS

List three persons not related to you, whom you have known at least one year. **Please have one of your references fill out and send in the attached Recommendation Form.**
If you were a camp volunteer at KHAC in the past, you may skip this step.

Name	Relationship	Email address	Years Known
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

**Please return completed application by
Friday, April 3, 2020 to the following address:**

ellen@kennedyarts.org
or
Ellen Muse-Lindeman
Kennedy Heights Arts Center
6546 Montgomery Road
Cincinnati, Ohio 45213

If you have any questions, please call **513-631-4278** or email **ellen@kennedyarts.org**

Recommendation Form for Kennedy Heights Arts Center Summer Camp Volunteers

The following student has applied to be a volunteer in our summer art camp program for diverse youth ages 5-13. They will be expected to assist our teaching artists with all aspects of camp including: modeling good behavior, assisting with art activities, keeping attendance, monitoring lunch-time and leading games/activities.

Student Name: _____

Recommended by: _____

How long have you know the applicant, and in what capacity:

Please rate the student in regards to the areas listed below:

Assumes responsibility: Above Average, Average, Below Average, NA

Is motivated to achieve: Above Average, Average, Below Average, NA

Has good work habits: Above Average, Average, Below Average, NA

Has positive sense of self: Above Average, Average, Below Average, NA

Is a role model for peers: Above Average, Average, Below Average, NA

Good personal conduct: Above Average, Average, Below Average, NA

Please check one:

I highly recommend, recommend, recommend with reservation, do not recommend this student.

Please share with us any other additional information about the applicant:

Your Signature: _____

Date: _____