indian creek camp

2018 NURSE APPLICATION
IMPORTANT TO ANSWER ALL QUESTIONS
Please Type or Print

PERSONAL

Name:_____ Birthday:_____

Home Address:_____

Cell Phone:_____ Alt. Phone:_____

E-Mail:_____ Marital Status:_____

Children that will be attending camp with you (Name & Age):_____
_____

What Adventist church are you a member of?_____

Pastor's name and contact information:_____
_____

Have you ever been convicted of child abuse or a sex-related offense? ☐ No ☐ Yes

If yes please explain:_____
_____

HEALTH

Any physical limitations? Yes / No If yes explain:_____

CERTIFICATION/EXPERIENCE

Credentials (ex. EMT, LPN, MD, DDS, RN):
Type:_____ License #:_____ State:_____

Certification (please circle Yes or No)

PALS: Yes / No Exp. Date:_____ BLS (CPR): Yes / No Exp. Date:_____

ACLS: Yes / No Exp. Date:_____ OTHER:_____ Exp. Date:_____

Area(s) of nursing experience (ex. EMT, PEDS, ER, etc.):_____
_____

Have you worked as a summer camp nurse before? Where?_____

IMPORTANT – You need to send a copy of your BLS and current Nursing License with this application.

GENERAL INFORMATION

Why do you want to volunteer at Indian Creek Camp?_____

_____

_____

What is your T-Shirt size?   S_____   M_____   L_____   XL_____   XXL_____

DO YOU FEEL COMFORTABLE TREATING, RECOGNIZING, ETC.?	YES	NO
Administration of OTC meds for: headache, chiggers, poison ivy, sunburns, colds/sinuses and upset stomach?		
Advising when campers need to go home because of illness?		
Advising when to see physician / call EMS?		
Bee/wasp stings?		
Cleaning minor abrasions?		
Homesickness?		
Minor burns?		
Monitoring juvenile diabetics?		
Monitoring/administering campers' medication?		
Removing splinters?		
Recognizing and Treating Signs and symptoms of dehydration?		
Spider bites?		
Triage for ear infections?		
Triage/immobilization of sprains/fractures?		
Triage/bandaging of lacerations?		

Is there anything you feel uncomfortable treating?   Yes / No   If yes explain:_____

_____.

Application/Certifications can be faxed (615-859-2120), emailed (icc@kytn.net) or mailed (Indian Creek Camp, PO Box 1088, Goodlettsville, TN 37070).

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