

Application Form				
Personal Info	First Name		Middel Names	
	Last Name		Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female
	Date of Birth		City/Town of Birth	
	Country of Birth		T-shirt Size	<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L <input type="checkbox"/> XL <input type="checkbox"/> XXL
	Weight		Height	
	Permanent postal address to be reached all the time			
	Street NO.			
	City		Country	
	Mobile Phone		Postal Code	
	Email		WhatsApp	
	Are you married	<input type="checkbox"/> Yes <input type="checkbox"/> No	Are you engaged	<input type="checkbox"/> Yes <input type="checkbox"/> No
	Do you have children	<input type="checkbox"/> Yes <input type="checkbox"/> No		
	Present Occupation		Name of School/Employer	
Passport Info	Do you have dual citizenship or passports	<input type="checkbox"/> Yes <input type="checkbox"/> No		
	If yes,which passport are you going to use for your visa?			

	Passport NO.		Place of Issue	
	Date of Issue		Date of Expeiry	
Emergency Contact	Name			
	Relationship			
	Phone			
Education Background	Name of University/College		Major Course of Study	
	Languages Spoken	<input type="checkbox"/> English <input type="checkbox"/> Russian <input type="checkbox"/> Chinese <input type="checkbox"/> Other_____		
Work History	Describe your most recent jobs		Reasons for Leaving	
	Career Plans			
	Have you previously worked at camps, if yes, please describe the working experience in detail			
Medical	<input type="checkbox"/> Yes <input type="checkbox"/> No	Are you in good health, if no, explain		

History	<input type="checkbox"/> Yes <input type="checkbox"/> No	Any Physical Disabilities, if yes, explain	
	<input type="checkbox"/> Yes <input type="checkbox"/> No	Do you Suffer from any pre-existing medical conditions, if yes, provide separate description	
	<input type="checkbox"/> Yes <input type="checkbox"/> No	Any Allergies, if yes, specify	
	<input type="checkbox"/> Yes <input type="checkbox"/> No	Are you a vegetarian	
	<input type="checkbox"/> Yes <input type="checkbox"/> No	Any Special Dietary needs	
	<input type="checkbox"/> Yes <input type="checkbox"/> No	Do you consume alcoholic beverages, if yes, how often?	
	<input type="checkbox"/> Yes <input type="checkbox"/> No	Do you smoke, if yes, how often	
	<input type="checkbox"/> Yes <input type="checkbox"/> No	Are you prepared not to smoke while at work	
	<input type="checkbox"/> Yes <input type="checkbox"/> No	Are you presently or have been, in the last two years, on any medication ,if yes, explain	
	<input type="checkbox"/> Yes <input type="checkbox"/> No	Have you ever suffered from a nervous breakdown, depression or other emotional disorder? if yes, explain	
	<input type="checkbox"/> Yes <input type="checkbox"/> No	Are you currently or have you ever received psychiatric care? if yes, explain	
	<input type="checkbox"/> Yes <input type="checkbox"/> No	Have you ever suffered from a eating disorder, if yes, explain	
	<input type="checkbox"/> Yes <input type="checkbox"/> No	Have you ever had a drug addiction/problem, if yes, explain	

	<input type="checkbox"/> Yes <input type="checkbox"/> No	Do you have any visible tatoos or body piercing, if yes, describe	
Personality & Interests	Do you prefer to work alone or with a group?Why?		
	Why do you want to be a camp counselor in China?		
	What do you think will be your greatest challenge in working overseas and why?		
Why should a camp director choose you as an participant?			
Tell us about your interests, hobbies & activities			

Background Check	<input type="checkbox"/> Yes <input type="checkbox"/> No	Have you ever been arrested or convicted of a criminal offense or are you at present, the subject of a criminal investigation If yes, a detailed explanation must be enclosed on a separate piece of paper				
	<input type="checkbox"/> Yes <input type="checkbox"/> No	Have you ever been charged with or convicted of sexual abuse or molestation				
	Note: A criminal police background check may be required for some programs and/or required by the consulate when applying for your visa. Further information will be given to you if you apply to these specific programs.					
Time	When can you come to China to start working with Chinese camps					
	When do you need to leave China for Russia					
Skills	List every skill, hobby or sports activity in which you have experience, then rate each in two areas: PE=Personal Experience and TA=Teaching Ability. We need an honest evaluation, please don't underrate or overrate your abilities. 10=Excellent; 9=Good; 8=Fair					
	Sports	PE	TA	Waterfront	PE	TA
	Outdoor Skills	PE	TA	Arts & Crafts	PE	TA

	Performing Arts	PE	TA	Science & Other	PE	TA
<p>Select from the skills listed above</p> <p>List the top 3 skills that you are capable of and willing to instruct at camp. Describe in detail all personal and teaching experience you have in connection with these skills, including the length of time involved with the skill.</p>						
Skill 1						
Skill 2						
Skill 3						

Qualifications & Certifications	List any certificate you have in connection with camp counselors
Leadership Experience	Describe all leadership and volunteer positions you have held
Experience with Children	Describe the most recent and relevant experiences you have had with children. List children's ages, your responsibilities, and years involved. Use a separate sheet if necessary
	Which age group have you had prior work experience? Check all that apply. <input type="checkbox"/> 5-7 years <input type="checkbox"/> 8-10 years <input type="checkbox"/> 11-12 years <input type="checkbox"/> 13-15 years <input type="checkbox"/> 16-17 years <input type="checkbox"/> Adults