Diocese of Sacramento
Job Description

Location: Sierra Foothills
Title: Camp Counselor – Overnight Camp
Department: Office of Youth and Young Adult Ministry
Classification: Non-Exempt
Schedule: Mid-June– August

Overall Responsibilities:
Live with campers in a small group outdoor setting. Will mentor campers, provide a positive role model, assist in teaching special programs (archery, nature, arts & crafts), doing activities with campers and promote a positive spiritual atmosphere.

General responsibilities:
1. To identify and meet camper needs.
2. To carry out camp activities with safety precautions.
3. To fulfill other staff administrative roles including assisting in the kitchen and cleaning

Type of Position:
• Seasonal

Essential Elements:
- Ability to communicate and work with campers of all ages and provide necessary instruction.
- Visual and auditory ability to identify and respond to environmental and other hazards related to the activities.
- Possess strength and endurance required to maintain constant 24-hour supervision of campers.
- Ability to hike 5 miles of uneven terrain, with a 25-pound pack.

General Responsibilities:
- Guide campers in participating successfully in all aspects of camp activities.
- Encourage compliance with Camp Health and Safety Regulations.
- Assist in cleaning all common spaces including dining room, activity areas, and restrooms/shower houses.
- Set a good example for campers and others, including cleanliness, punctuality, sharing clean-up chores, sportsmanship, and table manners.
- These are not the only duties to be performed. Some duties may be reassigned, and other duties may be assigned as required.

Desired qualifications:
- College student or equivalent, or at least 18 years of age and a high school graduate
- Current lifeguard, First Aid And C.P.R. for the professional rescuer certification or ability to pass (includes CPR w/AED and first aid)
- Basic wilderness first aid certification desirable
- California food handler certificate required.

_____   _____
Signature of Employee   Date

_____   _____
Signature of Supervisor   Date