

**Trollbacken, Swedish Language and Culture Camp**  
**August 20<sup>th</sup> – 25<sup>th</sup>, 2018**  
**Counselor Application Form** *(Please return before May 28th, 2018)*

Name \_\_\_\_\_ M \_\_\_\_\_ F \_\_\_\_\_

Date of Birth \_\_\_\_\_ Grade completed June 2018 \_\_\_\_\_  
High School \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_

Email \_\_\_\_\_

**T-Shirt size: YM YL S M L**

Have you had experience in working with children ages 7 – 13? **Yes** \_\_\_\_\_ **No** \_\_\_\_\_

List experience you have had being responsible for groups of children in a “camp” setting or a leadership position. Include when and where. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Do you consider yourself an outgoing person? \_\_\_\_\_  
\_\_\_\_\_

Are you aware of any medical/emotional problems, which could interfere with your responsibilities in this position as a counselor? **Yes** \_\_\_\_\_ **No** \_\_\_\_\_ if yes please explain on a separate sheet of paper.

Can you speak and read Swedish? **Yes** \_\_\_\_\_ **No** \_\_\_\_\_ If yes, please rate yourself,

**1-10** \_\_\_\_\_

Were you born in Sweden? **Yes** \_\_\_\_\_ **No** \_\_\_\_\_ Have you visited Sweden? **Yes** \_\_\_\_\_ **No** \_\_\_\_\_

What is your connection with Sweden?  
\_\_\_\_\_  
\_\_\_\_\_

Do you have a First Aid Card? **Yes**\_\_\_ **No**\_\_\_ Can you swim? **Yes**\_\_\_ **No**\_\_\_

What are your favorite sports? Do you play any instrument?

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Please describe yourself, your talents and skills and why you are interested in being a counselor at Trollbacken \_\_\_\_\_

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Why do you feel you would be a good counselor at Trollbacken? \_\_\_\_\_

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Have you ever have been convicted of a crime? **Yes**\_\_\_ **No**\_\_\_  
If yes, please explain.

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Please list two references (i.e. camp director, employer, teacher or other)  
Include name, telephone number and occupation.

Name \_\_\_\_\_ Phone \_\_\_\_\_ Occupation \_\_\_\_\_

Name \_\_\_\_\_ Phone \_\_\_\_\_ Occupation \_\_\_\_\_

***Please return this application before May 28<sup>th</sup>, 2018***

Send to:

Tina Kreft-Tengblad

4114 SW 48th Place

Portland, OR 97221 Questions? Please call Tina at 503-296-4884 or Email:

[Director@trollbacken.com](mailto:Director@trollbacken.com)

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