



## International Camp Counselor Program Church Endorsement Form

This form is used to endorse an applicant for the ELCA's International Camp Counselor Program. It should be completed by an authorized official of the endorsing church body. Please save this document on your device before filling it out. Please return completed endorsements via email to [intcampcounselors@elca.org](mailto:intcampcounselors@elca.org).

### APPLICANT INFORMATION

Name of applicant: \_\_\_\_\_

Name of church body: \_\_\_\_\_

Describe the applicant's  
current involvement in  
the church.

Describe how the  
applicant was selected to  
be nominated for the  
International Camp  
Counselor Program.

Describe how the  
applicant's experience in  
the program would  
benefit your church and  
its mutual exchange with  
the ELCA.

I believe that this person is appropriate for a position that involves the direct supervision and care of children and youth.

Yes

No

To the best of my knowledge, I believe that this person intends to return home, as required, at the conclusion of this program.

Yes

No

#### ENDORSER INFORMATION

Name of endorser: \_\_\_\_\_

Title/position in the church: \_\_\_\_\_

Church office address for delivery of visa documents by DHL courier (no post office boxes please):

\_\_\_\_\_ Street address / physical location

\_\_\_\_\_ City

\_\_\_\_\_ State / province (if any)

\_\_\_\_\_ Postal code

\_\_\_\_\_ Telephone number

\_\_\_\_\_ Email address

By signing below, I certify that the applicant named above has been interviewed, selected, and endorsed by this church to be a participant in the ELCA International Camp Counselor Program.

\_\_\_\_\_  
Signature of endorsing official

\_\_\_\_\_  
Date

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