

Counselor In Training (CIT) and Volunteer Staff Application

Name: _____

Date: _____

Address: _____

Home Phone: (____) _____

Cell Phone: (____) _____

Email: _____

City: _____

What is the best way and time to contact you?

State: _____ Zip: _____

Session Preference: 1.) _____

2.) _____

3.) _____

Please note that session preferences cannot be guaranteed.

Experience, Education and Training

List any experience you have working, volunteering or interacting with children. Include coaching, babysitting, scouts, or any other experience. List supervisor's names and contact information as appropriate.

List all schools attended in the last 5 years, include dates attended.

List your church experience or involvement in other spiritual groups. Include dates of membership, address phone number and name of pastor/group leader.

List any other training or experience that you feel will help you in your role as a CIT.

(Application continues on reverse)

Please answer each of the following questions. Use a separate sheet of paper if you need more space.

What do you consider to be the most important part of your camp experience?

Why do you want to be a CIT?

Why will you be an excellent CIT?

What activities would you most like to lead or help lead?

If you could change one thing about Camp Wright, what would it be?

What else do we need to know about you when considering you for a CIT position?

HAVE YOU EVER BEEN CONVICTED OF A FELONY OR DO YOU HAVE FELONY CHARGES PENDING AGAINST YOU? **YES OR NO** _____ HAVE YOU EVER BEEN CONVICTED OF A FELONY OR MISDEMEANOR OTHER THAN MINOR TRAFFIC VIOLATIONS, OR ARE THERE CHARGES PENDING AGAINST YOU? **YES OR NO** ____ HAVE YOU EVER HAD A SUBSTANTIATED CHILD ABUSE, CHILD SEXUAL ABUSE OR CHILD NEGLECT CASE AGAINST YOU? **YES OR NO** _____ IS THERE A PETITION NAMING YOU IN JUVENILE, CIVIL OR CRIMINAL COURT CONCERNING CHILD ABUSE, CHILD SEXUAL ABUSE, OR CHILD NEGLECT? **YES OR NO** ____ IF YES TO ANY OF THE ABOVE, PLEASE ATTACH INFORMATION RELATING TO THE CONVICTION OR OFFENSE OR PENDING CHARGE.

Applicant's Statement

I CERTIFY THAT THE ANSWERS GIVEN HEREIN ARE TRUE AND COMPETE TO THE BEST OF MY KNOWLEDGE. I AUTHORIZE INVESTIGATION OF ALL STATEMENTS CONTAINED HEREIN AND THE REFERENCES LISTED TO GIVE YOU ANY AND ALL INFORMATION CONCERNING MY PREVIOUS EMPLOYMENT AND ANY PERTINENT INFORMATION THEY MAY HAVE, PERSONAL OR OTHERWISE, AND RELEASE ALL PARTIES FROM ALL LIABILITY FOR ANY DAMAGE THAT MAY RESULT FROM FURNISHING THE SAME TO YOU. IN THE EVENT OF EMPLOYMENT, I UNDERSTAND THAT FALSE OR MISLEADING INFORMATION GIVEN IN MY APPLICATION OR INTERVIEW(S) MAY RESULT AND DISCHARGE. I UNDERSTAND THAT I WILL BE REQUIRED TO ABIDE BY ALL REGULATIONS SET FORTH BY MY EMPLOYER.

Signature of Applicant: _____ Date: _____

Signature of Parent or Guardian if under 18: _____ Date: _____

Parent Name (printed): _____