## Seymour Recreation

## 2019 Counselor in Training (CIT) Application

Name: $\qquad$ DOB: $\qquad$

Address:

City, State, Zip: $\qquad$

Home Phone: $\qquad$ Cell Phone: $\qquad$

Email:

| References: List 3 people NOT relatives or peers, who know of your character, experience \& abilities. We prefer one to be a teacher/coach |  |  |  |
| :--- | :---: | :---: | :---: |
| Name |  | Relation | Email |
| 1. |  |  |  |
| 2. |  |  |  |
| 3. |  |  |  |


| Experience: List all activities in which you have been involved (sports, youth groups, clubs, volunteer activities) |  |  |
| :--- | :---: | :--- |
| Activity | Location |  |
| 1. |  |  |
| 2. |  |  |
| 3. |  |  |
| 4. |  |  |
| 5. |  |  |
| 6. |  |  |


| Camp Experience: List any camps you have attended |  |  |
| :--- | :---: | :---: |
| Name | Location | Dates Attended |
| 1. |  |  |
| 2. |  |  |
| 3. |  |  |
| 4. |  |  |

If hired, I agree to participate in the CIT Program Mon - Fri, 8:30 am - 2:30 pm for the following weeks(dates subject to change based on Seymour's last day of school:
$\boxtimes$ Week 1, June 17 - June 21 (required) $\boxtimes$ Week 2, June 24 - June 28
Must select minimum of 3 additional weeks:
$\square$ Week 3, July 1 - July $5 \square$ Week 4, July 8-July $12 \square$ Week 5, July 15 - July 19
$\square$ Week 6, July 22 - July $26 \square$ Week 7, July 29 - August 2
Child Signature:
Parent Signature as witness:
$\qquad$ Date:
Date: $\qquad$

