

Seymour Recreation

2018 Counselor in Training (CIT) Application

Name: _____ DOB: _____

Address: _____

City, State, Zip: _____

Home Phone: _____ Cell Phone: _____

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	Phone
1.			
2.			
3.			

Experience: List all activities in which you have been involved (sports, youth groups, clubs, volunteer activities)

Activity	Location	Supervisor/Coach
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:
 Week 1, June 25 – June 30 (required) Week 2, July 2 – 6 (required – Excl. July 4)

Must select minimum of 3 additional weeks:
 Week 3, July 9 – July 13 Week 4, July 16 – July 20 Week 5, July 23 – July 27
 Week 6, July 30 – August 3 Week 7, August 5 – August 10

Child Signature: _____ **Date:** _____
Parent Signature
as witness: _____ **Date:** _____