

# NEW CANAAN YMCA

## SUMMER DAY CAMP 2016

### COUNSELOR-IN-TRAINING APPLICATION

The CIT program is based on a mandatory 4 week training session and depending on performance and schedule availability this could include an 8 week summer camp experience. We will conduct evaluations during your 4 weeks of training and based on the evaluations you could be invited back and paid up to \$100/session. As a C.I.T you will have the opportunity to experience and explore Camp Y-KI, Sports Camp and Camp Mini.

The program will cover; planning activities, teaching and modifying games, behavior modification, creativity, communication with parents, supervision at the waterfront, goal setting, active listening, working with younger campers, camp communication, service learning, team work, and what to do on a rainy day. The CIT program will utilize a curriculum as a guide to help teach some of the components listed. The CITs will be exposed to the skills necessary to be a great counselor and have a chance to see if this kind of work is for them.

ONCE THIS APPLICATION IS SUBMITTED TO THE YMCA, A DIRECTOR WILL CALL BY APRIL 30, 2016 TO SCHEDULE AN INTERVIEW APPOINTMENT.

\*NOTE: The 4 week training session is the first 4 weeks of camp June 27<sup>th</sup>-July 22<sup>nd</sup>

\* FEE: \$800 Program Fee. Includes a four week leadership experience. Additional work opportunity possible for one to two sessions (up to \$100 per session paid to C.I.T. for successful completion). \*Payment is based on attendance per session

NAME \_\_\_\_\_ DATE \_\_\_\_\_  
(Complete First) (Middle) (Last)

ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

PARENT EMAIL \_\_\_\_\_ APPLICANT EMAIL \_\_\_\_\_

PHONE ( ) \_\_\_\_\_ CELL PH: ( ) \_\_\_\_\_ DATE OF BIRTH \_\_\_\_\_

CURRENT SCHOOL GRADE \_\_\_\_\_ SCHOOL \_\_\_\_\_

**PREVIOUS CAMP EXPERIENCE:**

<u>Camp / Address</u>	<u># Years Attended</u>	<u>Ages When Attended</u>	<u>Previous C.I.T. Experiences</u>	
			<u>Yes</u>	<u>No</u>
1. _____	_____	_____	_____	_____
2. _____	_____	_____	_____	_____

**REFERENCES (NOT A RELATIVE):**

<u>Name</u>	<u>Relationship to You</u>
1. _____	Phone _____
2. _____	Phone _____
3. _____	Phone _____

**BRIEFLY, WHY WOULD YOU LIKE TO BE A C.I.T. AND WHAT DO YOU FEEL YOU WILL ADD TO THIS PROGRAM?**

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**WHAT DO YOU HOPE TO GET OUT OF A C.I.T. PROGRAM?**

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**WHAT DOES LEADERSHIP MEAN TO YOU?**

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**WHAT ACTIVITIES AND OR WORKSHOPS WOULD YOU LIKE TO LEAD OR TEACH?**

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**WHAT CERTIFICATES TO YOU CURRENTLY HOLD? DATES COMPLETED? FIRST AID, CPR, LIFEGUARD, WSA, ETC.**

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Please read the following commitment statement below carefully and sign in the space provided.

**Counselor-in-Training commitment statement:**

If chosen as a Counselor-in-Training (CIT), I will commit to understanding the requirements and responsibilities of being a good camp counselor. I will commit to regular meetings, camp fees, counselor in training, camp dates, and any other areas needed to perform my duties as a camp counselor-in-training. I further understand that if I do not meet the standards of a responsible CIT, I will be dismissed from my duties. I also give permission for the New Canaan YMCA to contact all personal references.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

**Parent commitment statement:**

As a parent/guardian of the youth completing this application, I understand the necessity to only select individuals that will be committed to the camping program. I will, to the best of my ability, support and encourage this youth to uphold their commitment to the New Canaan YMCA Summer Camp CIT program if selected.

PARENT/GUARDIAN SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_



Please return to: HR Department  
564 South Avenue  
New Canaan, CT 06840

(203) 966-4528 • [www.newcanaanymca.org](http://www.newcanaanymca.org)