



FOR YOUTH DEVELOPMENT®
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

2017 Summer Camp Supplemental Application (required)

Name: _____ Date: _____

Address: _____

City: _____ State: _____ ZIP: _____

Phone at school: _____ Home phone: _____

Mobile phone: _____ Email: _____

University: _____ Major: _____

Camp Position(s) Applying For: (see position descriptions online – MUST SPECIFY!)

AVAILABILITY

Camp Staff Training is required for all staff. Please indicate if you can attend the following:

May 30-31 Camp Lead Team Training (lead positions only):	Yes	No	Maybe
June 2-3 Camp Staff Kick Off <u>Overnight</u> at the Y:	Yes	No	Maybe
June 4 (afternoon) CPR & First Aid Training:	Yes	No	Maybe
June 5-9 (afternoon/evenings) All-Camp Staff Training:	Yes	No	Maybe

Please list dates you are available this summer (from when to when):

Please list any dates you know in advance you will not be available to work:

NOTE: Staff are allotted a limited number of days off for the season which must be approved in advance.

TELL US ABOUT YOURSELF

Any previous camp experience? Yes or No _____ If yes, as a: ___camper ___staff member ___volunteer

Are you: ___16 years or older ___18 years or older ___21 years or older

Describe any awards or special recognition you have received at work, school, or as a volunteer:

Your special skills and interests such as archery, arts and crafts, drama, sports, aquatics, rock- climbing, nature, or other:

List any hobbies or special interests you have that might prove beneficial to you as a camp counselor:

Please list any certifications you have such as CPR, lifeguard, first aid or other:

Please tell us why you want to work as a camp counselor with children:

Please describe something you're especially proud of that you've done at work, school, or as a volunteer.