



Greetings from YMCA Camp Twin Lakes!

We are so excited that you are interested in joining the Counselor-In-Training (CIT) Program here at YMCA Camp Twin Lakes. This letter will outline the application process for the Summer 2020 Day Camp CIT Program.

The first step is to complete the application form and seek out three people who are willing to serve as a reference for you by March 31, 2020. The completed application can be mailed to YMCA Camp Twin Lakes using the address below or emailed to camptwinlakes@ymcagwc.org. Reference forms will be completed by three people. Work related references are best. Teachers, coaches, volunteer supervisor, et al. are acceptable. Personal references; family friend, neighbor, or relative may be included for one reference. Please make sure that you have a valid email address for that person as we will email them the reference form. Once we receive your completed application, we will contact you. Applications received by the deadline will be given priority. Group interviews will be scheduled to begin in April.

Applicants must be entering either 10th or 11th grade in the fall of 2020. There are two four-week Day Camp CIT sessions this upcoming summer.

Session 1: June 1-26

Session 2: July 6-31

CITs that are accepted into the CIT Program are welcome to attend one or both sessions. To successfully complete the program, CITs must attend all four weeks of the session. *The cost per session is \$440 for YMCA Members and \$475 for Non-Members.*

We expect all CIT applicants to complete this application on their own. We request that as the applicant, you, rather than your parent/guardian, contact us directly if you have questions.

We look forward to hearing from you soon!

**Eli Rolli
Associate Executive Director
YMCA Camp Twin Lakes**

**YMCA Camp Twin Lakes
204 E. Little Elm Trl • Cedar Park • TX • 78613 • 512-250-9622
Day Camp CIT Program • camptwinlakes@ymcagwc.org • ymcagwc.org**



COUNSELOR-IN-TRAINING (CIT) APPLICATION FORM

Please return the completed application by March 31, 2020. The CIT program is a four week session. The cost for the program is \$440 Y Member/\$475 Non-members per session. Please choose the session(s) you plan to attend if you are accepted into the program.

Session 1: June 1-26 _____

Session 2: July 6-31 _____

Applicant Name: _____ Today's Date: _____

Address: _____

Telephone: (____) _____ Birth date: ____/____/____ Grade in 2019-20: _____

Applicant E-mail Address: _____

Have you been to Summer Day Camp before? If so, which camps? What years?

If not, how did you hear about the CIT program?

Billing Contact: _____ Billing Contact Phone: (____) _____

Billing E-mail Address: _____

Billing Contact Address: _____

REFERENCES

Please list 3 references with a valid email address. Work related references are best. Teachers, coaches, volunteer supervisor, et al. are acceptable. Personal references; family friend, neighbor, or relative may be included for one reference. We will take care of emailing the Reference Form to them, so please let them know to look out for that email once you submit this application.

Name: _____ Relationship: _____

Phone: (____) _____ Email: _____

Name: _____ Relationship: _____

Phone: (____) _____ Email: _____

Name: _____ Relationship: _____

Phone: (____) _____ Email: _____

Please answer the following questions. If you need more space, please attach an additional sheet.

1. Why do you want to be a CIT?

2. What skills would you like to gain from the CIT program?

3. What qualities do you have that would make you an asset to the CIT program?

4. That do you expect to find most challenging as a CIT and how will you handle that challenge?

5. If you were a Camp Counselor, what would you want campers to say about you?

6. Describe a time when you worked as part of a group/team and describe your role in that group/team.

7. Please think about a positive role model of yours and list 3 attributes or qualities that you admire in this person.

8. What is something that you have done with past year that you are proud of?

9. If you have any relevant certifications such as CPR, First Aid, Lifeguarding, Archery, et al., please list them below with expiration dates.

Applicant's Signature: _____ Date: _____

Parent/Guardian Signature: _____ Date: _____

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