



Greetings from YMCA Camp Twin Lakes!

We are excited to hear you are interested in the Counselor-In-Training program. This letter will provide all the information you need to apply to be a CIT in Summer 2019. Applications are available at all branches of the YMCA of Greater Williamson County and online at <http://camptwinlakes.ymcagwc.org/day-camp/> under the download section to the left. Forms can be emailed upon request.

If interested, please complete the application form and return with completed reference forms to camp by March 31, 2019. Reference forms should 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 have references sealed in separate envelope with the reference signature across the seal. References may email the completed form directly to camp. 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 February.

Applicants must be entering either 10th or 11th grade in Fall 2019. There are two four-week sessions available for the CIT program. The first session runs June 3-28 and the second session is July 8-August 2. CITs that are successful in entering the program are welcome to attend one or both sessions. To successfully complete the program, CITs must attend all four weeks.

As a part of the CIT program, each CIT must organize a fundraiser to help raise money for Annual Campaign, our campership fund. Funds raised are used to help send kids to camp that otherwise may not be able to attend. Each CIT is tasked with raising at least \$100 by the end of their CIT session. CITs can work in groups or individually, within the summer or before camp. Ideas may include: bake sale, yard sale, taking part in a sponsored walk/run/swim, car wash, camp sponsors. Ideas can be discussed starting at group interviews.

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!

-YMCA Camp Twin Lakes CIT Team

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



FOR YOUTH DEVELOPMENT®
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

COUNSELOR-IN-TRAINING (CIT) APPLICATION FORM

Thank you for your interest in the CIT program. Please return the completed application by March 31, 2019. The CIT program is a four week session. The cost for the program is \$440 member/\$475 non-member per session. Please choose the session(s) you plan to attend if your application is successful.

Session 1: June 3- 28 _____

Session 2: July 8-August 2 _____

Applicant Name: _____ Today's Date: _____

Address: _____

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

Applicant E-mail Address: _____

Have you been to 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

Give attached Reference Form to 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 have references sealed in separate envelope with the reference signature across the seal. References may email the completed form directly to camp.

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. What do you see as your new responsibilities during your transition from camper to CIT?
5. What do you expect to find challenging as a CIT and how will you handle those challenges?
6. Describe your ideal counselor. What kind of CIT do you want to be?
7. Describe a time when you worked as part of a group/team and describe your role in that group/team.
8. The Annual Campaign, including Pennies for Peggie, allows us to provide funds for campers that otherwise wouldn't be able to attend camp. What are your initial plans to raise at least \$100 for Annual Campaign?
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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YMCA Camp Twin Lakes Counselor-In-Training (CIT) Reference Form

CIT Applicant: _____

The above-named candidate has applied for a training program with our organization and has given your name as a reference. You can be of considerable assistance to us in determining ability to meet standards for youth work. This program requires emotional maturity, proven leadership ability, and sensitivity to the challenges youth face in the world today. Basic character and attitude are more important to us than work experience. If successful, the candidate will be working closely with children entrusted to our care. Thank you for taking time to assist us and this candidate in the process.

How long have you know this applicant? _____

What is your relationship to this applicant? _____

	Fair	Average	Above Average	Exceptional	Unable to comment
Ability to affect others positively					
Emotional maturity					
Communication Skills					
Leadership ability					
Concern for others					
Cooperation					
Ability to relate to youth					
Responsibility					
Personal initiative					

Is there any reason this candidate should not work with children?

What are this candidate's greatest needs for development?

Please provide any other information that may assist us in assessing this candidate on the back of this form.

Please circle one of the options regarding this candidate:

Highly Recommend	Recommend	Indifferent	Do Not Recommend
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Signature: _____ Occupation: _____

Name: _____ Telephone: (____) _____

Email address: _____

Please return completed form to applicant in sealed envelope or
 Email to Camp Program Director • camptwinlakes@ymcagwc.org • ymcagwc.org