

**VerShare Community Camp 2017**  
**Counselors-in-Training (CITs) & Outdoor Leadership Week**  
**APPLICATION FOR AGES 13y – 15y by July 1, 2017**

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
 School: \_\_\_\_\_ Current grade: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_  
 E-mail address: \_\_\_\_\_

***Parent/Guardian Information***

Name(s): \_\_\_\_\_  
 Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_  
 check if address is same as above  
 If not: (street, town, state, zip) \_\_\_\_\_

***Personal References:***

Please give two references. At least one should be someone other than a relative (teacher, guidance counselor, or a family you babysit for, etc)

Your references should be able to speak to your potential abilities as a CIT.

Name	Address	Telephone Number	What is your relationship to this individual?

I, \_\_\_\_\_, give permission for the Camp and my child's references to discuss information about \_\_\_\_\_'s abilities, strengths, and challenges.

Parent/Guardian Signature: \_\_\_\_\_

**APPLICATIONS DUE POSTMARKED BY FRIDAY, MAY 20<sup>th</sup>, 2017**

Mail To: Camp Coordinator  
 Andrea Herrington  
 3292 Vershire Center Rd  
 Vershire, VT 05079

Email To: [vershare.camp@gmail.com](mailto:vershare.camp@gmail.com)

FOR MORE INFO: Contact Andi via email (above) or phone: h) 802-333-3690 c) 802-793-4376  
*I am happy to talk with parents/guardians about Camp, the CIT role/experience, supervision, OLW, etc.*

### ***Applicant Questionnaire:***

Please take a few moments to answer the following questions. The purpose of this questionnaire is to help you think about why you are interested in being a CIT & participating in OLV, and to give us the chance to get to know you better.

Please feel free to use extra space/other paper to answer.

- 1) Why do you want to be a CIT for VerShare Camp? Why do you want to participate in OLV? What do you hope to gain from these experiences?
  
- 2) What special qualities or skills would you contribute to the group?.
  
- 3) What do you enjoy most about working with children?
  
- 4) Please describe a time when you were a good role model to a younger child.
  
- 5) Please describe a difficult situation you've experienced when caring for a child and how you handled it. What would you have done differently?
  
- 6) What is your previous camp experience? Have you been a CIT before? (*this camp or others*)
  
- 7) What is your previous experience in outdoor activities like hiking, boating, camping, etc. What do you enjoy about being outdoors? What do you find most challenging?
  
- 8) Please let us know about your other interests & hobbies:

***What ages would you most like to work with?***

\_\_\_\_\_ (5y – 7y)    \_\_\_\_\_ (8y – 12y)    \_\_\_\_\_ ***Both OK***

***☺ THANK YOU FOR YOUR TIME! ☺***