

Dear C.I.T. Candidates,

Please fill out and return the enclosed application to the Camp Office. Your completion of the application will grant you an invitation to the C.I.T. Weekend to be held in April.

Thank You

EXPLANATION OF THE C.I.T. PROGRAM

Our Counselor-In-Training Program is for high school Juniors and Seniors — persons at least sixteen years of age or who have completed the tenth grade. The content of the C.I.T. Program is designed to give a well-rounded background of experience in the operation of all phases of camp life. This is not a paid position, however, the C.I.T. is given free room and board and training experience. The major portion of this experience consists of working directly with Village Directors, Counselors, and Program Area Instructors, thus providing direct experience in a practical learning situation.

The objectives of the C.I.T. Program are as follows:

1. To help prepare for a future camp counselor position
2. To present a basic philosophy of camping and guidance
3. To develop awareness of the aims and purposes of camping
4. To develop certain skills and techniques for group work
5. To develop some of the essential skills associated with camping
6. To provide teaching experience in many of the acquired skills
7. To provide progressive experience in leadership work

The C.I.T. is very important in the life of Camp Kon-O-Kwee, contributing new ideas and future leadership.

YMCA CAMP KON-O-KWEE

126 Nagel Road, Fombell PA 16123-1198

staffing@ycamps.org • (412) 391-3328 • (724) 758-6238

COUNSELOR-IN-TRAINING APPLICATION

Name: _____ Phone: _____

E-mail: _____

Address: _____

City: _____ State: _____ Zip: _____

Social Security #: _____ Age: _____ Birthday: _____

Grade Completed by Summer: _____ School: _____

Extra Curricular Activities in School, Positions of Leadership held in Community

List Camps Attended, Years, & Special Experiences Gained _____

List Hobbies _____

Current Lifeguarding, CPR, or First Aid? Please list with expiration date

List Special Camping Skills _____

Circle the Session(s) you would like to attend 1ST 2ND 3RD

List three references. Do NOT list relatives.

1. Name _____ Occupation _____

Address _____ Zip _____ Phone _____

2. Name _____ Occupation _____

Address _____ Zip _____ Phone _____

3. Name _____ Occupation _____

Address _____ Zip _____ Phone _____

On the back of this application, briefly share with us what feelings you have about the purpose of YMCA camping & what kind of contribution you are capable of making.