# COUNSELOR-IN-TRAINING INFORMATION & APPLICATION PACKET

## 2027




Camp Jorn YMCA
www.CampJornYMCA.ORG
(715)-543-8808

EST. 1953

CAMP JORN YMCA

# CHECKLIST



*Hi There!*

**PLEASE CHECK OFF EACH ITEM PRIOR TO SUBMITTING YOUR APPLICATION**

- ☐ I have registered for the CIT session online. Please note that dates are non negotiable. You will automatically be waitlisted. Your card won't be charged unless your teen is selected to serve as a CIT.
- ☐ Both sections of the application are complete (Parent & Participant)
- ☐ Two (2) Letters of Recommendation are submitted. Letters of Recommendation should be signed and need to be enclosed with this application to complete the process. Letters can come from anyone who can speak to your character and ability to successfully complete the program. References should have known you for at least one year. Teachers, coaches, counselors, mentors, pastors, or employers work great!



# CHECKLIST CONTINUED

☐ Place both the application and two letters of reference in a single envelope/package and mail to:

Camp Jorn YMCA
Attn: Lauren Heger
13591 Zenner Lane
Manitowish Waters, WI 54545

or email to Lauren@campjornymca.org

Applications are due by January 14th!

# WHAT TO EXPECT

Once the application is received, our Camp Operations Director will reach out to you to schedule an interview. Interviews will be conducted over zoom January 30, January 31 and February 1. (Please note that the application and interview process are designed to prepare students for future job application processes.)

Parents/guardians will be notified no later than February 16th, 2027 if their camper was accepted into the CIT program.

# COUNSELOR-IN-TRAINING PARENT/GUARDIAN APPLICATION

CIT Full Name: _____

CIT DOB: _____

Address: _____

City, State, Zip: _____

Parent Guardian #1 Full Name: _____

Parent Guardian #1 Phone: _____

Parent/Guardian #1 Email: _____

Parent Guardian #2 Full Name: _____

Parent Guardian #2 Phone: _____

Parent Guardian #2 Email: _____

CIT Email:

**Please answer the questions below to the best of your ability. You may enclose additional pages as needed.**

1. **Why would you like your child to participate in this program? Whose idea was it to apply?**

# CIT PARENT/GUARDIAN APPLICATION CONTINUED

2. What is the biggest obstacles you think your child might face? What will be the most difficult part of the program for your child?

3. Is there anything we should know about the mental or physical health of your child? Please explain.

# CIT CANDIDATE APPLICATION

**Are you ready to be CIT? Ask yourself...**

- Do I have a sincere desire to work with children?
- Would I like the opportunity to develop and improve my leadership ability?
- Do I enjoy a hands-on, outdoor work environment?
- Am I ready to become a role model for children?
- Am I excited to sing camp songs and show camp spirit?
- Do I have the ability to work well with others in a variety of situations?
- Can I hike 6-12 miles per day with a heavy pack (30-60 pounds)? (This answer will determine which session you are place in (Sessions 1 and 3 will include a trip where this ability is required and Session 2's trip will be less intense)
- Do I have age-appropriate social skills and ability to make safe decisions?
- Does my mind feel healthy and prepared to be challenged?

**Please answer the questions below to the best of your ability. You may enclose additional pages as needed.**

1. Why do you want to be a CIT and what skills would you like to gain?

# CIT CANDIDATE APPLICATION CONTINUED..

2.What qualities, strengths, or talents do you have that would make you an asset to the CIT Program?

3. Please explain any previous camping, hiking, or adventure experience you have:

# CIT CANDIDATE APPLICATION CONTINUED..

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

5. How do you think being a CIT is different from being a camper?

# CIT CANDIDATE APPLICATION CONTINUED..

6. Share about a time when you needed to overcome a challenge when working with a group or on a team.

7. Are there any reasons you may have difficulty performing any of the tasks or activities as a CIT? Any worries you have? If yes, please explain.

# CIT SCHEDULE

| | | |
|---|---|---|
| CIT 1 | June 20-July 9, 2027 (NO RETURN BUS AVAILABLE) | $2,500 |
| CIT 2 | July 11-23, 2027 | $2,000 |
| CIT 3 | July 25-August 13, 2027 | $2,500 |








# THANK YOU!

I have read and answered the questions above truthfully and feel that my participation as a CIT will enhance the program for campers, staff and fellow CITs.

Candidates Signature _____

Date _____

Parent/Guardian Signature _____

Date _____