

Summer Day Camp 2023 Counselor-in-Training Application

Name			Phone #				
			Can we text you? ☐ Yes ☐ No				
City & Zip Code				Date of Birth			
Email (if different fro	om parents)						
School currently atto	ending		Currer	nt grade level			
Have you volunteere	ed at a day camp before	e?	Circle	Γ-shirt size: Adult S – Ν	Л – L – XL – Ot	ther	
Parent's Name(s)				Parent's cell			
Parent's Email				Can we text you?	☐ Yes	□No	
Preferred Method o	f Communication:	Email	☐ Phone Call	☐ Text	☐ Physical	Mail	
Days available: (mar	k all that apply)						
☐ Mondays AM	☐ Tuesdays AM	☐ Wednesd	lays AM	☐ Thursdays AM	☐ Fridays AM		
☐ Mondays PM	☐ Tuesdays PM	☐ Wednesd	lays PM	☐ Thursdays PM	☐ Fridays PM		
Lake of the V	Homer (Tues/Wed only Woods, Mahomet ds, extracurricular activiting, camping, sports,	ities, hobbies, a	-	•	d help you t	o be an	
What do you think is	s your most important o	characteristic or	trait that will he	lp you as a CIT?			

Why do	you want to work with children?				
What go	oals do you want to achieve through the Counselor-in-Training pr	ogram?			
Do you	have any licenses or certifications? (CPR, First Aid, etc.)				
Type of	license or certification	Year Received	Expiration I	Date	
	have additional information that we should be aware of? (includ		☐ Yes	□No	
Persona	al References <mark>(OPTIONAL)</mark> : please list two adults who know you w	vell.			
	Name Phone	Phone		Relationship	
1					
2					
	heck here if you would be interested in other volunteer opportun or example, at the interpretive center or museum)	ities with the Forest Prese	erve		

Please be aware that space is limited and not everyone who applies will be accepted into the program.

Please return application by May 1, 2023 to:

Or email application by May 1, 2023 to:

Attn: Catherine Schneider Homer Lake Interpretive Center 2573 S. Homer Lake Rd Homer, IL 61849 Catherine Schneider cschneider@ccfpd.org