

## **C.I.T. SANFORD CAMP APPLICATON**

(Counselor in Training)

(minimum of sophomore)					nor Usenior	
Indicate your	availability (	check all th	at apply):			
☐ Day Camp	8:15 am – 3:	30 pm				
☐ Sports Can	np 8:15 am –	3:30 pm				
☐ Extended Care at Sanford campus			7 am – 8:	7 am – 8:15 am		
☐ Extended Care at Sanford campus			3:30 pm –	3:30 pm – 5:30 pm		
☐ Extended Care at N. Wilmington			7 am – 8:15 am and/or 3:30 pm – 5:30 pm			
(N. Wilmington	location: St. Ma	ry Magdalen,	7 Sharpley Rd, Wilm	nington, DE 1980	3)	
→ Circle the	weeks you ar	e available t	to work:			
6/12/23	6/19/23	6/26/23	7/3/23	7/10/23		
7/17/23	7/24/23	7/31/23	8/7/23	8/13/23		
			City			
Address:			City:	State:	ZIP:	
Mother's Name: Father's Name:						
Mother's Phone:			Cell/Work/Home (circle one)			
Father's Phone:			Cell/Work/Home (circle one)			
Emergency Co	ntact:					
Emergency Contact Phone:						
What school d	o you attend?					
Your E-Mail Ad	ldress :					
Tell us how yo	u heard about	us and why չ	you want to be a (	C.I.T.:		
					<del></del>	

<u>Email completed form and calendar to Dave Szaroleta whose contact information you can see at the bottom of this page.</u>