

2023 Counselor in Training Application

An Equal Opportunity Employer

July 30-Aug 4, 2023 @ Millstone 4-H Center ● 1296 Mallard Dr ● Ellerbe, NC, 28338 www.facebook.com/SertomaDeafCamp

Submit all applications to: <u>campsertomanccoordinator@gmail.com</u>
All applicants must be 17 years of age.

NOTE: This a NEW Counselor in Training application for 2023.

Application deadline: May 1, 2023

APPLICANT						
Full Name			Name you prefer			
School			Grade			
HOME ADDRESS						
Street		City	City		Zip	
Phone Number (include area code)						
EMPLOYMENT INFOR	MATION					
I am applying for:						
☐ Counselor in Tra	ining					
Have you ever attended	•	D No □ Ves.	- When?			
riave you ever allended	oertoina Dear Camp	e dino di les	- vviieii:			
PAST CAMP EXPERIE	NCE					
Please list any past exp	eriences at any types		erience is not require	d for this posit	ion.	
Camp		Years	Years		Type of Camp	
EDUCATION						
List any education you l	nave obtained.					
Diploma/GED	Institu	ution	Year Obtained		Area	
High School						
CERTIFICATIONS						
CERTIFICATIONS List any certificates that	nertain to camp life. F	or example CPR tra	nining life guard etc			
				<u> </u>	ppy Provided	
Certification		Date of Training	ate of Training Expiration Date		h to application)	

As a staff member at this one-week camp, you will be giving up a great deal of privacy and comfort, working long and demanding hours, adhering to camp policies which may be limiting (curfews, time on, time off, lack of privacy, putting the needs of campers first, etc.) Do you anticipate any problem complying with this type of lifestyle? \square Yes \square No

Why do you want to be a CIT?	ATION (Please use additional paper if nec	essary.)		
What kinds of leadership and/or camp	ing experiences have you had, if any?			
List any extracurricular activities (i.e. s	school, church, volunteer organizations):			
Please share any additional informati staffing position:	on about yourself that illustrates how you	u would be an ideal candidate for a camp		
ASL EXPERIENCE	use American Cirus Longueses			
ASL Skills. Please rank your ability to				
Basic Communication—This is the equivalent of ASL 1. You have a basic vocabulary, you have basic understanding of fingerspelling, signs, and culture. You could carry on conversation related to school, family, and hobbies, but would not feel comfortable translating or facilitating between a signer and a non-signer. You are still nervous about signing in front of deaf ASL users.				
language users, but would have d advanced and technical vocabular	ation—You can easily carry a conversatior ifficulty if asked to voice for a non-signer. You is not advanced. This is the equivalent of aside to converse with deaf people.	Your vocabulary is extensive, but not		
	-You can easily carry on a conversation w SEE users. You could comfortably sign or eople is natural.			
	Deaf person or CODA who uses ASL as a saily be mistaken for Deaf rather than hear			
REFERENCES				
	ellow students. We must have complete	ur work experience, character and ability. e information on each reference including		
Name	Address/City/Zip	Phone (including area code)		
ADDITIONAL INFORMATION				
These positions require that application Are you 17 years of age: ☐ Ye				
, ,	correct to the best of my knowledge.			
Signature of Applicant	Date			
Signature of Parent/Guardian				