



Pine Valley Swim and Tennis Club

4638 White Marsh Road

Baltimore, MD 21237

PineValleyJobs@gmail.com

www.pinevalley.club

(410) 668-9888 fax (410) 663-3654

RE: Counselor In Training Program

Dear Applicant:

Thank you for your interest in our Counselor in Training Program. Our Counselor in Training Program is a leadership program that will help give you the necessary tools in working with children in a camp setting, through initiative and a spirit of positive teamwork.

At the age of 14 years old you may apply to be Jr. C.I.T. There is a weekly fee for this program, please visit our website at www.pinevalley.club for current rates. (Rate based upon when online registration and payment in full received.) Participants will receive a daily lunch, two snacks and Full Club Single Membership privileges.

15–17 year olds you may apply to be a C.I.T. In this volunteer position, participants will receive a daily lunch, two snacks and Full Club Single Membership privileges. Those volunteering may wish to complete Lifeguard, First Aid and CPR training offered on site (course fees apply, please see registration information available online). This will further qualify you for consideration of future employment at Pine Valley either on the camp staff or pool staff.

Interested candidates for either program will need to complete and submit the Application of Counselor in Training and a Camp Registration form. You will also need to include at least two letters of recommendation, with at least one being from a teacher.

There are a limited number of openings per week. There will be mandatory preseason training sessions as well as continuous training throughout your weekly sessions. Anyone failing to attend these sessions will forfeit his or her position and another candidate will be chosen.

If you have any questions, please feel free to contact us.

Sincerely,

Frank & Lynda

Camp Directors

Pine Valley Day Camp

Enclosures

APPLICATION FOR COUNSELOR IN TRAINING

Legal Name: _____ Nickname (or Preferred): _____

Last
First
M.I.

Address: _____ ZIP _____ Telephone: () _____

E-Mail Address: _____

Upon acceptance as a counselor in training, a Health History form must be completed prior to June 1st.

Available for Work: All Camp Sessions (As completed on Camp Registration*)
 Only selected weeks (As completed on Camp Registration*)

* Parent or guardian must complete an online Camp Registration for you. Applicants will not be considered until this is completed. Jr. CIT fees will be refunded in full if the applicant is not accepted into the program. Otherwise, all normal camp policies apply.

Are any friends or relatives working here? Yes _____ (Who?) No

Where you previously a camper at Pine Valley Day Camp? Yes _____ Last Year as Camper

No Then, how did you hear about the position? _____

EDUCATION

	Name and Location	G.P.A	# of Years	Course / Degree Major
High School				
Middle School				
Tech. School				
Other				

TRAINING (List any relevant certification you have, including level obtained and expiration dates.)

	Date Course Passed	Expiration Date	Date Enrolled / Expected Completion	Certifying Organization	Location
Community First Aid					
Community CPR					
Counselor in Training Workshop					
Other-					

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Please specify work availability:

	M	T	W	R	F
From					
To					

Have you ever been dismissed from employment for any reason other than lack of work? Yes No If yes, explain:

EMPLOYMENT OR VOLUNTEER RECORD (Attach Resume' for additional information, list most recent and relevant information here.)

Dates From/To	Name and Address of Employer	Position/Title Duties	Wages Start/Leaving	Supervisor / Title	Reason For Leaving

JOB APPLICANT'S RELEASE TO PROSPECTIVE EMPLOYER TO REQUEST INFORMATION ABOUT THE APPLICANT

In consideration of Pine Valley Swim and Tennis Club's ("Pine Valley") agreement to consider my job application, I hereby authorize it or it's designated agents to engage in background checks, examine my criminal record and vehicular driving record, and investigate any and all statements I have made on the job application (and during job interview) and, further, to obtain any other information regarding my previous employment, my veracity, my skills and/or abilities which the above-named employer may deem relevant.

I authorize any individual, firm, partnership, corporation, educational institution, public official or public entity ("Information Providing Entity") to furnish Pine Valley any information regarding my previous employment or education and any pertinent information they may have and release all Information Providing Entities from any liability on any theory whatsoever for providing such information to Pine Valley. I also release Pine Valley, its current and former employees, and any other persons giving references from any liability on any theory whatsoever for the exchange of this information and any other reasonable and necessary information incident to the employment process.

Signature: _____ Date: _____

If under 18, Signature of Parent or Guardian: _____ Date: _____

REFERENCES (Not family members) (A recommendation form must be submitted from a teacher and someone else, under separate cover.**)

Name	Address	Telephone	Business/Profession

**Interviews may be conducted prior to receiving the recommendations, however, acceptance into the program will not occur until/unless at least the 2 recommendations are received.

Indicate your level of competency in the following areas: (0 = no experience, 1 = have done, 2 = fair experience, 3 = could help instruct or lead campers, 4 = very comfortable instructing/leading campers, 5= could instruct other staff, 6 = very competent instructing staff/extensive training and/or certification). (Note: Some of these skills are of particular importance to some job positions, but not to others).

Swimming _____ First Aid _____ Crafts _____ Nature Study _____ Drama _____ Indoor Games _____
 Story Telling _____ Computer Skills _____ Singing _____ Team Building _____ Tennis _____

Please comment on each of the following:

1. What type of work are you expecting to perform?

2. What would be the areas you most need to work on? _____

3. What factors do you consider when you are planning and leading a skill or activity? _____

4. What adjectives would a person use to describe your personality? _____

5. What does the camp have to offer you and how can you benefit from it?

Hobbies or Special Interests: _____

This application is current only for (90) days. If you have not heard from Pine Valley within (90) days and still wish to be considered for employment, it will be necessary for you to fill out a new application.

*******CONDITIONS OF EMPLOYMENT*******

I understand that as a condition of employment, I must attend one or more orientation sessions and read the Employee Handbook. I must also attend regular Department meetings during the season. These sessions are educational in nature and are for my own benefit as well as Pine Valley Swim & Tennis Club (hereinafter referred to as "The Club"). There may be no compensation for these sessions. If hired, I am expected to be available for work the entire summer season or term of employment and that guidelines for unpaid vacation requests are in the Employee Handbook. However, I cannot assume that this vacation request will be granted. I also realize that my employment and/or hours-worked are completely dependent upon weather and business conditions. If either or both prove unfavorable, my work schedule may be drastically reduced or eliminated entirely. Because of the size and complexity of the Club, I realize I may be required to perform duties other than those specifically assigned to my position. I agree that my employment is subject to all of the Club's employment policies and terms and conditions of employment. The Club may copyright, sell, use and publish all photographic negatives and other likeness made of me while employed with or without the use of my name, all without additional compensation to me. I may be required to submit myself to medical examinations, which may include testing for drugs and/or alcohol, by physicians of the Club's selection as often as requested during my employment. I understand that failing to pass or refusing any such examination may prevent me from being employed by the Club; and I further understand and agree that failure of the Club to request a physical examination shall not be construed as an admission by the Club that I am physically qualified to perform any specific type of service. At all times, I will be polite and respectful of the guests, members and staff of the Club. I will forward any problems to the proper person. I will work efficiently and understand that the sign in system will be combined to determine my actual work time for service hours and other considerations. I understand that I will be required to wear the appropriate uniform.

Signature: _____ Date: _____

If under 18, Signature of Parent or Guardian: _____ Date: _____

(Your signature indicates you have read and understood the above.)

****CERTIFICATION****

Please read carefully before signing.

1. I certify that the information in this application for employment is true and complete to the best of my knowledge. I understand that deliberate falsification or omission of this information may result in refusal of employment or dismissal.
2. In consideration of my employment, I agree to conform to the rules and regulations of Pine Valley Swim and Tennis Club, Inc., it's affiliates and subsidiaries (collectively, "Pine Valley"). I understand that if hired I will be an at will employee and my employment and compensation can be terminated with or without cause, and with or without notice, at the option of either the Pine Valley or myself. I understand that no representative of Pine Valley, other than the President or Vice President of Pine Valley, has any authority to enter into any agreement for employment for any specified period of time, or make any agreement contrary to the foregoing.
3. In consideration of Pine Valley's acceptance of this employment application and, if applicable, my subsequent employment by Pine Valley, I hereby agree to submit all disputes related in any way to employment at Pine Valley (including any dispute concerning my application for employment with Pine Valley) based on legally protected rights recognized in the state where I applied for a position to final and binding arbitration pursuant to Pine Valley's Alternative Dispute Resolution Policy ("ADR Policy"). In the event the binding arbitration provision of Pine Valley's ADR Policy is deemed void for any reason, I hereby agree to waive any right to jury trial that I may have.

Signature: _____ Date: _____
(Your signature indicates that you have read and understood items 1 through 3 above.)

If under 18, Signature of Parent or Guardian: _____ Date: _____
(Your signature indicates that you have read and understood items 1 through 3 above.)

For Office Use Only:

Camp Reg: ____/____/____ I: _____ I by: _____ Accepted: Y or N

Pine Valley Day Camp Counselor in Training



"Fun in the sun since 1991!"

APPLICANT: Complete this top, boxed portion and provide this form to someone who may offer a recommendation on your behalf. Acceptable references include a teacher, coach, family for whom you have babysat, and the like. Family members and peers are not acceptable references. The person providing the reference will send this form to the Pine Valley's main office directly.

INFORMATION RELEASE AUTHORIZATION: I (applicant) have applied to the Counselor in Training program at Pine Valley Day Camp. I hereby authorize you to furnish Pine Valley Day Camp with all the information requested and any other information you have concerning me. I hereby release you and your organization and Pine Valley Day Camp from all liability and any damage whatsoever arising therefrom.

Name of Applicant: _____

APPLICANT'S SIGNATURE: _____ Date: _____

REFERENCE: Please comment on the information requested below. Pine Valley is a summer day camp at Pine Valley Swim & Tennis Club for boys and girls 5 to 13 years old. Our CITs work with counselors to help provide a fun and positive camp experience for a group of 8-15 younger campers. The Pine Valley *Counselor In Training* program is a hands-on learning experience to develop program leadership skills and techniques for working with campers. CITs will be an important part of our camp community and will be role models for young campers. Applicant must be 14 – 17 years old.

Please complete this form honestly to help us determine if this prospective CIT will be a positive role model for young people. Use the back of this sheet for additional comments or attach a letter to the completed recommendation form. Please be further advised that all information will be kept confidential. Please send this form to: Pine Valley Day Camp 4638 White Marsh Road Baltimore, MD 21237 Fax: 410.663.3654. Phone: 410.668.9888

We are interested in your knowledge of the applicant related to:

- Leadership skills and experience
- Ability to serve as a role model for younger children
- Experience working with children
- Level of responsibility and judgment
- General work or study skills
- Ability to be a positive member of a community

Reference's name: _____ Title: _____

Relationship to applicant: _____ How long have you known applicant? _____

In what capacity? _____

If you employed the applicant, would you rehire? Why or why not? _____

Have you had the opportunity to observe the applicant interacting with school aged children? If so, in what setting have you observed them? Please comment on your observations:

Would you leave your child (or a child in your life) under the influence of this applicant for an extended period of time?

Do you have any reason to believe the applicant would not be a positive role model for younger campers?

Have you observed the applicant in leadership situations? Please comment on those observations:

Please assess the applicant in the following areas:

	Below Average	Average	Above Average	Outstanding
Self-Confidence				
Judgment /Common Sense				
Enthusiasm				
Leadership Skills				
Responsibility				
Work Ethic				
Maturity				

How well does the applicant interact with others?

◆ Very Well ◆ Ok ◆ Not Very Well ◆ Not Sure

From your observations, what will this individual offer to a summer day camp?

Please share additional comments you feel give us insight into the applicant (Please use additional paper to complete your comments.)

How would you rate the applicant's potential for working with children in a summer day camp?

1 2 3 4 5 6 7 8 9 10

Signature: _____ Date: _____

Daytime Phone# _____ E-Mail Address: _____

Thank you for your assistance in helping to evaluate this individual!