

Y Summer Camp at OLEC Counselor-In-Training Program 2022 General Information

Purpose

Y Summer Camp at OLEC's Counselor-In-Training (CIT) Program provides leadership training for teens. In effect, CITs stand on a bridge between camper and staff. CITs gain valuable counseling skills needed to ensure a smooth transition to future staff positions. Successful completion of this program may lead to a Counselor position the following year.

The CIT program is not for everyone- candidates must be ready and willing to put the needs and interests of campers ahead of their own.

The CIT program is for those interested in helping to bring the magic of camp to our campers. There is an expectation of increased maturity and ability to be a positive role model. CITs are monitored and evaluated by all staff. Evaluations are a basis for hire as a Counselor for the following summer.

CITs will meet every day with the CIT Director and/or Day Camp Director. Topics include orientation of camp, emergency procedures, camp policies, child abuse prevention, age-appropriate discipline etc. CITs will spend the rest of the day shadowing counselors and working with a group of campers. CIT curriculum and program goals will be met weekly. Once approved, CITs can register for any number of our nine-week sessions.

Goals

1. To develop methods of positive leadership.
2. To assist teens in the transition from camper to staff member.
3. To provide new and expanded opportunities for individual physical, mental and spiritual growth in a camp setting.
4. To assist individuals in transferring newly acquired skills to a group setting.
5. To provide a foundation of future camp staff whose philosophy is consistent with the vision of the camp and the YMCA of Auburn-Lewiston.

Specifics

Who can apply? Applicants must be entering Grade 9th or 10th to apply for the CIT program.

Deadlines June 1, 2022 - Application and references are due.

Fee \$100.00 (members) and \$110.00 (non-members) for one-week sessions
Payment is due after the CIT is accepted into the program.

Schedule There are nine CIT sessions:

- | | |
|--|----------------------------------|
| ___ CIT 1- June 20- June 24 | ___ CIT 6- July 25- July 29 |
| ___ CIT 2- June 27- July 1 | ___ CIT 7- August 1 - August 5 |
| ___ CIT 3- July 5- July 8 *no camp July 4* | ___ CIT 8- August 8 - August 12 |
| ___ CIT 4- July 11 - July 15 | ___ CIT 9- August 15 - August 19 |
| ___ CIT 5- July 18 - July 22 | |

References Applicants must have three references. Two of these individuals must be either a recent teacher, coach or supervisor and one reference must be a relative.

If you have any questions, please contact Abby Fuller, Senior Program Manager at afuller@alymca.org.

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Name: _____ Birth Date: _____ Age by 6/1/2022: _____

Phone: _____ Best Way to Reach You? Text Email Phone

Email: _____ How often do you check your email? Daily Weekly

Address: _____
Street City State Zip

Parent/Guardian's Name(s): _____ Email: _____

Parent/Guardian Business/Cell Phones (for emergencies): _____

Parent/Guardian's Name(s): _____ Email: _____

Parent/Guardian Business/Cell Phones (for emergencies): _____

Name of High School: _____ Grade: _____

Expected Month and Year of Graduation: _____

Extra-curricular activities involved in and offices held:

Session Preference: Please check your session preference.

- | | | |
|--|--|---|
| <input type="checkbox"/> CIT 1- June 20-June 24 | <input type="checkbox"/> CIT 4- July 11-July 15 | <input type="checkbox"/> CIT 7- August 1-August 8 |
| <input type="checkbox"/> CIT 2- June 27-July 1 | <input type="checkbox"/> CIT 5- July 18-July 22 | <input type="checkbox"/> CIT 8- August 8-August 12 |
| <input type="checkbox"/> CIT 3- July 5-July 8 *no camp July 4* | <input type="checkbox"/> CIT 6- July 25- July 29 | <input type="checkbox"/> CIT 9- August 15-August 19 |

Camp/Work Experience or Community Involvement (paid or unpaid)

Dates	Organization	Supervisor	Phone #	Duties

References- Only one reference must be a relative.

Name	Address	Phone #	Relationship

I have read the information regarding the YMCA Counselor-In-Training Program and understand the scope and nature of the program.

Applicant Signature

Date

Parent/Guardian Signature

Date

Parent/Guardian Print name

<u>Office Use Only</u>
Received _____
Interview _____
Program _____

Interview Scheduled _____