

Application for 2015 Summer Camp Counselor in Training Program Mid-Iowa Council Summer Camp

This is an application to be a Counselor in Training for the 2015 summer camp season. Please complete this form and return to the address below. To be a CIT, one **must be 14 years old by June 1, 2015**. Thank you for your interest.

Basic Personal Information

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Telephone: (_____) _____ Cell Number: (_____) _____

Email: _____ Shirt Size: _____

Scouting Background

Council: _____ District: _____

Troop # _____ Crew # _____ Pack # _____

Current Position: _____ Highest Youth Rank: _____

Other positions held: _____

Counselors in Training may be invited to counsel one week at a time. If a Counselor in Training has performed well, they may be asked back to counsel another week.

Please check the session(s) you would like to be a Counselor in Training: Please indicate your interest: 1st, 2nd, 3rd, choice(s). ***You will not be able to be a Counselor in Training the same week your unit is at camp.***

Week 1: June 14-June 20 _____ Week 3: June 28-July 4 _____ Week 5: July 12-July 18 _____

Week 2: June 21-June 27 _____ Week 4: July 5-July 11 _____ Week 6: July 19-July 25 _____

Counselors in Training will be assigned to program and support areas to meet the needs of the camp. The Program Director will take into consideration the interest of the Counselor in Training.

Please indicate your interest (1st, 2nd, 3rd, etc.) below:

Handicraft _____ Scoutcraft _____ Aquatics _____

Ecology _____ Shooting Sports _____ Cub Scout Program _____

Briefly state why you want to be a Counselor in Training (use other side if necessary):

APPLICANT'S SIGNATURE: _____ DATE: _____

PARENT'S APPROVAL _____

APPROVAL OF SCOUTMASTER _____

Any questions can be directed to Todd Eipperle, Camp Director 515-250-5539. Return application by April 1, 2015 to: Camp Director, Mid-Iowa Council, 6123 Scout Trail, Des Moines, Iowa 50321
www.midiowacouncilbsa.org