

Counselor-In-Training Application

(This form is for candidates who are 15 years of age at the start of the camp season)

Name _____	Date of Birth _____
Address _____ _____	Social Security Number _____
Home Phone _____	Email _____
Cell Phone _____	_____

Educational Background

High School _____

Last Grade Completed (As of July of this year - Circle One)

9 10 11 12

Current Certifications

CPR Yes ___ No ___
Lifeguard Training Yes ___ No ___
Water Safety Instructor (WSI) Yes ___ No ___

If you have any current certifications, kindly submit a copy to the camp office.

Experience with Children:

(Please list most recent first)

<u>Position/Dates</u>	<u>Camp/School/Babysitting</u>	<u>Supervisor/Adult</u>	<u>Phone #</u>
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_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

(Please see page 2)

Pocantico Hills Day Camp
599 Bedford Road, Sleepy Hollow, New York 10591
(914) 631-2440 x104 Email: summercamp@pocanticohills.org

2 References:

Name	Relationship to Applicant	Phone #
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Areas of Interest (Circle those which apply)

- | | | | | |
|-------------|-----------|-----------|--------------|-------------------|
| Dramatics | Singing | Dance | Music | Video/Photography |
| Arts/Crafts | Sports | Swimming | Diving | Bicycling |
| Camping | Computers | Newspaper | Storytelling | Other |

In the space provided, explain why you would like to work at Pocantico Hills Day Camp.

Please be advised that all new employees of the Pocantico Hills Central School will be finger printed.

Signature _____ Date _____