

# Counselor-In-Training Application

Camp Gold Hollow - Camp Fire Golden Empire

**PLEASE PRINT**

Name: \_\_\_\_\_ Camp Name: \_\_\_\_\_

Address: \_\_\_\_\_

E-mail: \_\_\_\_\_ Phone: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ (MM/DD/YY) School: \_\_\_\_\_ Grade in Fall: \_\_\_\_\_

Name of Parent or Guardian: \_\_\_\_\_

E-mail: \_\_\_\_\_ Phone: \_\_\_\_\_

## Experience in Clubs and Other Organizations

List name of organization, years involved, and leadership role if applicable.

1. \_\_\_\_\_  
\_\_\_\_\_
2. \_\_\_\_\_  
\_\_\_\_\_
3. \_\_\_\_\_  
\_\_\_\_\_

## Camp Experience

List name of camp, location, years attended, and leadership role if applicable.

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

## Other Leadership or Work Experience

Leadership courses taken: \_\_\_\_\_

Work or volunteer experience: \_\_\_\_\_

## Certifications

List any current certifications you hold, and their expiration dates.

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## Camp Skills

Show skills you have with an “H”; show skills you can lead or teach with “T”.

<input type="checkbox"/> Archery	<input type="checkbox"/> Folk Dancing	<input type="checkbox"/> Nature Identification
<input type="checkbox"/> Backpacking	<input type="checkbox"/> Outdoor Games	<input type="checkbox"/> Orienteering
<input type="checkbox"/> Boating/Kayaking	<input type="checkbox"/> Handcrafts	<input type="checkbox"/> Outdoor Living Skills
<input type="checkbox"/> Canoeing	<input type="checkbox"/> Hiking	<input type="checkbox"/> Photography
<input type="checkbox"/> Creative Writing	<input type="checkbox"/> Informal Drama/Skits	<input type="checkbox"/> Poetry
<input type="checkbox"/> Ecology Activities	<input type="checkbox"/> Musical Instrument	<input type="checkbox"/> Singing
<input type="checkbox"/> Fishing	<input type="checkbox"/> Nature Crafts	Other: _____
<input type="checkbox"/> Sketching	<input type="checkbox"/> Storytelling	_____

## Please write a brief statement on the following:

Reasons you wish to be a Counselor-In-Training.

What you feel you can contribute to the camp as a C.I.T.

What qualities do you possess that make you a good role model for younger children?

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Describe yourself in 5 words or less.

What do you hope to do or learn while being a C.I.T. at camp?

## References

List names and contact information of two people (not relatives), who know you well. Describe how they know you (school, church, volunteering etc.), and for how long.

1) Name: \_\_\_\_\_

E-mail: \_\_\_\_\_ Phone: \_\_\_\_\_

How they know you: \_\_\_\_\_ For how long: \_\_\_\_\_

2) Name: \_\_\_\_\_

E-mail: \_\_\_\_\_ Phone: \_\_\_\_\_

How they know you: \_\_\_\_\_ For how long: \_\_\_\_\_

I give permission for Camp Fire Golden Empire to check references and verify information.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

## Email your application to:

Patty "Penguin" McCulley, Camp Gold Hollow Camp Director at [PattyCampGH@gmail.com](mailto:PattyCampGH@gmail.com)

We will email you a confirmation when application is received and schedule a phone/Zoom interview.