

2012 4-H CAMP COUNSELOR & COUNSELOR IN TRAINING (CIT)

Fact Sheet and Application Form

Note: Reapplication is required every year

This is your first step toward becoming a Camp Counselor or CIT

Notice: Due to limited space available for counselors & CIT's at 4-H Camp, only the most qualified applicants will be selected.

ROLE OF COUNSELORS and COUNSELORS in TRAINING (CIT's)

The Counselors plan the 4-H Camp program with the assistance of the Camp Co-Chairs and Co-"Sofas", Counselors in Training, Camp Director(s), and the County Extension Agent. All are responsible for selecting the program topics, arranging speakers/presenters, and obtaining equipment or other materials needed for camp. The Counselor in Training (CIT) will carry out the same responsibilities as the Counselor; however, they will work with a Counselor. Each Counselor and CIT will be responsible for specific responsibilities in the pre-planning stages of camp and at camp itself. As part of the Leadership Team, the Counselor and CIT shares in the overall responsibility for the success of camp – the learning, safety, and fun.

APPLICATION PROCESS:

1. **If you are interested** in becoming a:
 - **Counselor:** You must have completed the 10th grade by the date of camp.
 - **Counselor in Training:** You must have completed the 8th grade by the date of camp.
 - a. Turn in a completed application to Gallatin County 4-H by **January 9, 2012.**
 - b. **Interviews will be required for all Counselor and CIT applicants to give you interview experience and to help with the selection process.** You will be notified of decisions following the selection process.
 - c. This year's camp is scheduled for **June 19-22, 2012** at **Hyalite Youth Camp** with Teen Counselors attending Camp from **June 17/18-22, 2012.**
2. **If you are selected**, you must attend all camp planning meetings unless you have an excused absence from the Extension Agent prior to the meeting. Failure to notify the Agent prior to the meeting may result in dismissal.
3. Complete a **Camp Registration Form** along with a **Health Form** and turn it into the Extension Office by the deadline, **May 14, 2012 with no late fee and by June 1, 2012 with a late fee of \$10.** We hope you will not have to pay a **Camp fee** this year.
4. Make check payable to:
 - Gallatin County 4-H*
 - 201 West Madison, Suite 300,*
 - Belgrade, MT 59714.*

Please respond to the following:

1. Why do you want to be a camp counselor or CIT?

2. List 3 of your strongest qualities and why it makes you a good candidate:

1) _____

2) _____

3) _____

3. List 3 personal challenges/areas of weakness and how you envision overcoming them :

1) _____

2) _____

3) _____

4. List any special training or experiences (i.e. first aid certification, CPR certification, leadership training, etc.) you have had or have:

5. What do you think the role of a Counselor in Training or Counselor should be?

6. Would your parents be willing to chaperone for a night or two? ____yes ____no
If yes, list dates/times: _____

Return to:

Gallatin County MSU Extension
201 W Madison Ave, Suite 300 Belgrade, MT 59714
Fax: (406) 388-3243

Each year the counselors and adult staff select a timely and fun camp theme and plan all the camp activities and programs around the theme. After giving this important topic of “theme” some thought, complete the following camp plan:

“My Camp Plan”

Camp Theme:

Group/Counselor Name Ideas:

Special Program (may be / not be related to theme):

Guest Speaker Ideas:

Recreation Ideas:

All Camp Activity Ideas:

Other Suggestions:

4-H Counselor & CIT Requirements

I will be expected to:

1. Complete the required number of training and planning hours and attend all required camp meetings.
2. Set a good example by not using profanity or telling off-color jokes and stories.
3. Not have in my possession or use tobacco, alcohol or illegal drugs while I am participating in the Teen Leadership Program and at 4-H camp.
4. **Abide by the NO CELL PHONE AT CAMP policy (note: unless otherwise authorized by Extension Staff).**
5. Be a responsible counselor.
 - a) Get to know each of campers personally and by name.
 - b) Have all campers, including myself; check in any of their medications with the medical staff.
 - c) Make sure each camper uses personal hygiene.
 - d) Make sure that all of my campers are familiar with camp facilities and camp rules.
 - e) Check for illness or injury, but don't make much of a "fuss" about minor things.
6. Be in my cabin with my campers at all times between the hours of "Lights Out" and "Rise and Shine."
7. Never punish a camper by ridicule or physical punishment – patience and understanding works wonders.
8. Urge safety at all times. Take time to explain how and why to do something safely.
9. Go with hurt or sick campers to the nurse or adult no matter how minor the ailment.
10. Organize, plan, and conduct special activities.
11. See that all campers are involved in all activities. Make sure no one is excluded.
12. Guide, suggest, and develop in camp a feeling of planning and doing things together.
13. Make sure campers understand they are responsible for their own behavior.
14. Be sure that all campers know that they must remain on the camp grounds at all times.
15. Be on time at all camp activities.
16. Be flexible – plans do change.

By signing below I acknowledge that I have read and agree to abide by the above responsibilities as a camp counselor. I understand and agree that I will be asked to call my parents/guardian immediately to pick me up if I conduct myself in an irresponsible manner, which includes being out of my cabin after hours and/ or the possession or use of tobacco, alcohol, illegal drugs, weapons or fireworks.

Signature of Candidate

Date

Signature of Parent/ Guardian

Date

Phone number of Guardian

RECOMMENDATION FORM from 4-H LEADER OR OTHER ADULT MENTOR

I, _____, am interested in being a 4-H Camp Counselor this summer. The camping staff would like your input about my qualities to fulfill the responsibilities of a counselor. Please comment on the following topics and return this form to the Gallatin County Extension Office. The form must be returned by **January 9, 2012**. Thank you.

1. Interaction with younger members (circle one): Excellent Good Fair Poor

Describe type(s) of interaction: _____

2. Club Responsibilities and/or leadership abilities:

- a) Offices held and performance _____
b) Completion of project work _____
c) Committee work _____

3. How would rate the applicants: Above Average Average Below Average

Emotional maturity/ judgment	_____	_____	_____
Leadership abilities	_____	_____	_____
Flexibility	_____	_____	_____
Communication skills	_____	_____	_____
Enthusiasm and energy	_____	_____	_____
Self-confidence	_____	_____	_____
Respect for authority	_____	_____	_____

4. Overall Attitude: _____

5. Strengths: _____

6. Weaknesses: _____

7. Do you recommend this 4-H'er to be a counselor? _____

8. Additional comments: _____

Advisor/ Leader Signature

Date

4-H Club Name

Advisor: Please send in this recommendation on or before **January 9, 2012** to:

Gallatin County MSU Extension
201 W Madison Ave, Suite 300
Belgrade, MT 59714
Fax: (406) 388-3243