

DUBOIS CENTER  
COUNSELOR IN TRAINING APPLICATION FORM

Name \_\_\_\_\_ Male \_\_\_\_\_ Female \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone# \_\_\_\_\_ Email \_\_\_\_\_ Cell \_\_\_\_\_

Age \_\_\_\_\_ Birthdate \_\_\_\_\_ Present Grade in School \_\_\_\_\_

Home Church & City \_\_\_\_\_

Present Church attending if different than home \_\_\_\_\_

Have you been a CIT before?    Yes \_\_\_\_\_    No \_\_\_\_\_

Name of camp and year \_\_\_\_\_

Additional Information

Special Talents and Skills    Mark your level of skill for each (less 1 2 3 4 5 more)

Crafts \_\_\_\_\_    Bible Study \_\_\_\_\_    Song leading \_\_\_\_\_    Game leading \_\_\_\_\_    Nature \_\_\_\_\_

Story Telling \_\_\_\_\_    Dance \_\_\_\_\_    Discussion leading \_\_\_\_\_    Sports \_\_\_\_\_    Drama \_\_\_\_\_

Team Building \_\_\_\_\_    Archery \_\_\_\_\_    Horse back riding \_\_\_\_\_    Canoeing \_\_\_\_\_

Musical Instrument (name instrument) \_\_\_\_\_

Other specialties \_\_\_\_\_

How many years have you been a camper and at what camp?

Why do you want to be a CIT?

What gifts and talents do you have to contribute to the camp as a counselor?

Do you belong to your youth group at church? \_\_\_\_\_ List some of your leadership skills?

Please include two letters of recommendation from persons not related to you. One should be from your pastor, Christian Education Leader, or Youth Group Leader. New letters of recommendation should be received each year. List your references below.

1. Name \_\_\_\_\_ Relationship \_\_\_\_\_
2. Name \_\_\_\_\_ Relationship \_\_\_\_\_

The information on this application form is correct.

I have never been terminated from a job or volunteer position because I attempted or actually engaged in sexual discrimination, harassment, exploitation, or misconduct; physical abuse; child abuse; or drug or alcohol related activities. I have never terminated any employment or volunteer activity to avoid facing charges of conduct named above. I have never been accused of those activities. If I have been I have explained fully on an attached page.

I have reviewed the policies of the camping program, a short list of which accompanied this application form. I will abide by them as well as respect the youth and adults with whom I work and abide by them.

Signed \_\_\_\_\_ Printed Name \_\_\_\_\_

Today's Date \_\_\_\_\_

Return this completed form with your CIT camp registration form and fee to:  
By mail DUBOIS CENTER, 2651 Quarry Rd., DuBois, Il. 62831  
By fax or email with a Visa/MasterCard number and expiration date to 618/787-7701 or  
[duboiscenter@frontiernet.net](mailto:duboiscenter@frontiernet.net)

