

Sagamore Beach Colony Club Day Camp
Counselor Application – 2015

Counselors (students entering 11th grade or older in the fall 2015) and counselors in training (CIT) (students entering 9th and 10th grade in the fall 2015) must complete the day camp counselor application. There are limited positions available. Complete this application and return it to Sarah Chick by **February 28th, 2015**.

Name _____ Home Phone _____

Home address _____
Street or box number _____ city or town _____ zip _____

e-mail address: _____

School Name _____

Current Grade in school _____ Date of Birth _____

College Address _____
(if applicable) street or box number _____ city or town _____ zip _____

Cell phone _____

Best way to contact you- phone? email? text? _____

Did you attend SBCC Day Camp? _____

1. Please describe your previous experience working with children. What did you enjoy about it and why? (If you have been an SBCC counselor before, please also describe what you enjoyed about your counselor position and why)

2. Please list any certifications, such as first aid, CPR and Red Cross Lifesaving that you have along with dates of certification

3. What type of extracurricular activities are you involved in?

4. Please explain why you are interested in becoming a counselor at the SBCC Day Camp

5. Please give us ideas on how you could improve SBCC Day Camp.

6. Please list any weeks/days that you would not be at camp. If you don't know, exact date, please list amount of time that you will be missing...(One week family vacation in July etc)

7. If you are selected to be an SBCC Camp Counselor, which group would you prefer to be in and why? (grp 1 -5&6, grp 2- 7&8, grp 3-9&10, grp 4 -11-13).

8. If camp could afford new equipment or other supplies for activities, what would you recommend and why?

References: Due to youth safety standards we require THREE REFERENCES. The best references are people who have hired you to work with children. Please no relatives if possible. These are not needed if you were a counselor or sub last year.

1. Name: _____

Address: _____

City: _____ State: _____

Phone: _____

Relationship: _____

2. Name: _____

Address: _____

City: _____ State: _____

Phone: _____

Relationship: _____

3. Name: _____

Address: _____

City: _____

Phone: _____

Relationship: _____



Have you ever been convicted of a crime: No Yes When?
Where?

Of note, by law, we need to run Core checks on all potential candidates.

Look Here!

All Applicants Must Sign Application

I certify that the information I have provided on this application is true and correct to the best of my knowledge.

Signature

Date

Parent/Guardian Approval (if under 18)

I give my approval for _____ to apply for a position as SBCC counselor and will assist him/her in completing the required duties.

Signature

Date

Relation to applicant _____

Please return completed application by Feb 28th to:

Sarah Chick,
3 Harlow Farm Road
Sagamore Beach, MA 02562