



Department of Environment,
Agriculture, Parks & Recreation

ORANGE COUNTY DEPARTMENT OF ENVIRONMENT, AGRICULTURE, PARKS & RECREATION
RECREATION DIVISION
302 WEST TRYON STREET | PO BOX 8181
HILLSBOROUGH, NC 27278
(919) 245-2660

C.I.T. APPLICATION:

The Orange County Department of Environment, Agriculture, Parks and Recreation have a policy of providing equal opportunities for all persons volunteering their services to the County. It is the policy of the County that all qualified applicants for volunteer will be recruited and assigned on the basis of merit without regard to race, color, religion, creed, national origin, age, disability, marital status, sexual orientation, or any other legally protected status.

Instructions: Please print or type all information. This application must be filled out accurately and completely. Do not leave an item blank. If an item does not apply, write N/A (not applicable). If you need additional space to answer a question fully, you may use full sheets of paper that are the same size as this page. You may attach copies of documents or certificates, which support your application.

Applicant Name: _____ Date of Birth: _____

Address: _____ City: _____ State: _____ Zip: _____

Telephone #: _____ Shirt size: _____

Applicant Email address: _____

Parent/Guardian Name: _____

Parent/Guardian Email Address: _____

Please select the sessions for which you are interested in becoming a C.I.T. Applicants will be **assigned** to a camp once the applicant has been accepted. Program fees are due **after** an applicant has been accepted into the program. Successful applicants are expected to commit to a minimum of 4 sessions.

Requested C.I.T Session (check all that apply):

- | | | | | |
|--|--|--|---|--|
| <input type="checkbox"/> Session A
June 12-June 16
7:30 a.m.-1:00 p.m.
\$35 | <input type="checkbox"/> Session E
June 26-June 30
7:30 a.m.-1:00 p.m.
\$35 | <input type="checkbox"/> Session G
July 10-July 14
7:30 a.m.-1:00 p.m.
\$35 | <input type="checkbox"/> Session K
July 24-July 28
7:30 a.m.-1:00 p.m.
\$35 | <input type="checkbox"/> Session O
August 7-August 11
7:30 a.m.-1:00 p.m.
\$35 |
| <input type="checkbox"/> Session B
June 12-June 16
12:00 p.m.-5:30 p.m.
\$35 | <input type="checkbox"/> Session F
June 26-June 30
12:00 p.m.-5:30 p.m.
\$35 | <input type="checkbox"/> Session H
July 10-July 14
12:00 p.m.-5:30 p.m.
\$35 | <input type="checkbox"/> Session L
July 24-July 28
12:00 p.m.-5:30 p.m.
\$35 | <input type="checkbox"/> Session P
August 7-August 11
12:00 p.m.-5:30 p.m.
\$35 |
| <input type="checkbox"/> Session C
June 20-June 23
7:30 a.m.-1:00 p.m.
\$28 | No Camp
July 3-July 7 | <input type="checkbox"/> Session I
July 17-July 21
7:30 a.m.-1:00 p.m.
\$35 | <input type="checkbox"/> Session M
July 31-August 4
7:30 a.m.-1:00 p.m.
\$35 | <input type="checkbox"/> Session Q
August 14-August 18
7:30 a.m.-1:00 p.m.
\$35 |
| <input type="checkbox"/> Session D
June 20-June 23
12:00 p.m.-5:30 p.m.
\$28 | | <input type="checkbox"/> Session J
July 17-July 21
12:00 p.m.-5:30 p.m.
\$35 | <input type="checkbox"/> Session N
July 31-August 4
12:00 p.m.-5:30 p.m.
\$35 | <input type="checkbox"/> Session R
August 14-August 18
12:00 p.m.-5:30 p.m.
\$35 |

Have you ever volunteered for the Orange County Department of Environment, Agriculture, Parks and Recreation? Yes No

If yes, please list the events and/or dates for which you volunteered? _____

REFERENCES:

Please list three references with phone numbers that may comment on your behalf.

Name: _____ Phone: _____ Relationship: _____

Name: _____ Phone: _____ Relationship: _____

Name: _____ Phone: _____ Relationship: _____

SUPPLEMENTAL QUESTIONNAIRE:

(If you need additional space to answer a question fully, you may use full sheets of paper that are the same size as this page. You may attach copies of documents or certificates, which support your application.):

Why are you interested in becoming a C.I.T.? _____

What do you feel you could contribute to a camp program? _____

What experience, if any, do you have with leading, instructing, or mentoring younger kids? _____

Are there any special areas of camp activities that you feel are your strength? (For example Arts & Crafts, Games, Theatre, Sciences, Sports, etc.). _____

Please explain how your strength listed above will benefit our camp programs. _____

COUNSELOR IN TRAINING (C.I.T) AGREEMENT

I agree to serve, if selected, as a volunteer Counselor-in-Training with the Orange County Recreation Division during the summer of 2020. I will comply with all of the following conditions and requirements:

1. I agree to conduct myself in a mature, responsible manner and to remember that I am a representative of the Orange County Recreation Division.
2. I agree to attend camp punctually each day. In the event of illness or an emergency, I will contact the Orange County Recreation Division Camp as soon as possible to notify him/her of my absence.
3. It is understood that since I am not an employee, I am not entitled to Orange County Government health insurance, worker's compensation programs, or any other benefit given to an employee of Orange County Government.
4. I have read and understand the Counselor-in-Training job description and agree to perform the duties therein to the best of my ability.
5. If my work performance or behavior is in any way deemed unacceptable by the C.I.T. Coordinator, I understand that I may be terminated immediately.

I understand that completion of the application process for the Counselor-in-Training position does not guarantee acceptance in the program.

C.I.T. Signature: _____ **Date:** _____

All complete applications will be reviewed thoroughly and without bias. Following the completion of this application, the Orange County Department of Environment, Agriculture, Parks and Recreation will only contact you if selected for interview. Selection for interview does not guarantee selection for C.I.T. position. Applicants must be available for an interview to be held the week of March 27-March 31. Selected C.I.T.s must be available for a training session on a date to be determined.

COUNSELOR IN TRAINING (C.I.T) CODE OF CONDUCT

The Counselor-in-Training program is designed to identify and develop young people into the leaders of today. Each C.I.T. has the responsibility to uphold high standards of behavior and conduct while participating in this program. As a C.I.T., each young person is looked at as a positive role model by our campers. The following Code of Conduct has been developed to assist C.I.T.'s know their responsibilities.

- I will be courteous at all times when working with other C.I.T.'s, camp staff, campers, and all other Recreation Division employees.
- I will listen and follow directions given to me by the camp staff and other Recreation Division employees.
- I will ask for assistance when I need it.
- I will not put myself or any other camper at risk.
- I will have fun in ways that are safe to camp, others, and myself.
- I will take my leadership training seriously. Through my actions I can have a positive impact on young lives.
- I will follow all camp rules at all times.
- I will accomplish all duties that are given to me and then report back to my counselor. I will not neglect my duties.
- I acknowledge and accept the following violations, if committed, are subject to progressive counseling and/or dismissal from camp as directed by the Camp staff.
 - Use of profanity
 - Blatant disobedience
 - Possession or use of alcohol, cigarettes, or other drugs
 - Violent behavior, such as hitting, fighting, threatening, etc.
 - Public display of affection
 - Behavior placing other campers at risk
 - Talking, texting or using my cell phone while working
- Progressive counseling will consist of the following procedures unless the severity or repetition of incident requires other action concerning suspension and/or expulsion:
 - Counselor or camp director will call parent to inform of behavior.
 - Camp staff will meet with parent regarding behavior.
 - Child will be suspended from camp and subject to review by the Program Director and will result in a second meeting with parents and staff.
 - Parents will meet with Program Director regarding expulsion from camp.

C.I.T. Signature: _____

Date: _____

Parent Signature: _____

Date: _____

COUNSELOR IN TRAINING (C.I.T) PARENT PERMISSION SLIP:

I, _____ hereby give permission for _____ to participate in
(Print parent guardian) *(Print name of child)*
the Orange County Recreation Division Counselor in Training (C.I.T.) program.

I understand that:

- My child will be required to participate in an interview process in order to be considered for a C.I.T. position, with interview to be held the week of March 27-March 31.
- Not all who apply may be chosen.
- Selected applicants must be available for a training session on a date to be determined.
- Accepted applicants will be **assigned** to a camp based on camp need and the individual C.I.T.'s availability, skills, and interests.
- Program fees are due **after** an applicant has been accepted into the program and accepted their assigned camp position(s).
- Accepted applicants will be expected to adhere to the standards of their position and may be subjected to progressive counseling unless the severity or repetition of incident requires other action including suspension and/or expulsion.
- Refunds will not be given for a child dismissed from the Orange County Recreation Division Counselor in Training program.
- Participation as a C.I.T. does not guarantee future employment as a camp counselor.

In consideration of my child's participation in the aforementioned Orange County program, I hereby release and discharge Orange County, the Orange County Department of Environment, Agriculture, Parks and Recreation Department, and any and all employees or agents thereof from all claims of any kind or nature whatsoever arising out of actions of the above said employees or agents. To the extent allowed by law, I also consent to the transportation of my child by above said employees or agents to and from such programs or activities conducted as part of this Orange County Department of Environment, Agriculture, Parks and Recreation Department program. I consent to my child being photographed while volunteering as a C.I.T.; Orange County Recreation reserves the right to photograph and publish photographs of participants for publicity purposes.

Parent Signature: _____ **Date:** _____