

**CAMP SEALE HARRIS**  
**COUNSELOR IN TRAINING**  
**APPLICATION**

*(Please fill out completely)*

**MUST**  
attach photo

NAME \_\_\_\_\_ DATE OF BIRTH \_\_\_\_/\_\_\_\_/\_\_\_\_

ADDRESS \_\_\_\_\_ CITY, ST, ZIP \_\_\_\_\_

PHONE (\_\_\_\_) \_\_\_\_\_ CELL (\_\_\_\_) \_\_\_\_\_

EMAIL \_\_\_\_\_

AGE \_\_\_\_\_ SEX \_\_\_\_\_ NAME OF SCHOOL \_\_\_\_\_

LAST GRADE COMPLETED \_\_\_\_\_ GRADE ENTERING THIS FALL \_\_\_\_\_

DO YOU HAVE DIABETES? \_\_\_\_\_

DO YOU KNOW SOMEONE WHO DOES? \_\_\_\_\_

ARE YOU FAMILIAR WITH DIABETES CARE? \_\_\_\_\_

HAVE YOU ATTENDED CSH BEFORE AS A CAMPER? \_\_\_\_\_ DATES \_\_\_\_\_

HAVE YOU ATTENDED ANY OTHER CAMPS BEFORE? \_\_\_\_\_

LIST ANY COURSES TAKEN IN CAMPING, LEADERSHIP, CHILD CARE, ETC.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

EXPERIENCE IN ANY CLUBS OR VOLUNTEER ORGANIZATIONS

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

ON THE BACK, PLEASE WRITE A BRIEF PARAGRAPH TELLING WHY YOU WANT TO WORK AT CAMP SEALE HARRIS, WHAT YOU INTEND TO CONTRIBUTE, AND WHAT YOU EXPECT TO GAIN. MAKE SURE YOU ADDRESS ALL PARTS.

REFERENCES: PLEASE HAVE TWO PEOPLE WRITE A RECOMMENDATION LETTER TO RETURN WITH YOUR APPLICATION, ONLY ONE OF WHICH CAN BE FROM CAMP.

Please have application **postmarked** by **February 28th, 2012**

SIGNATURE \_\_\_\_\_ DATE OF APPLICATION \_\_\_\_\_

CIT Selections are finalized during the month of March and you will be notified by mail and/or phone regardless.

RETURN TO: CAMP SEALE HARRIS  
500 CHASE PARK SOUTH, SUITE 104  
HOOVER, AL 35244