**4-H CAMP TEEN COUNSELOR APPLICATION**

**Youth Ages 15-19 as of January 1, 2017**

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age as of January 1st \_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Zip: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Teen email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Teen cell phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Texting? Yes No

T-shirt Size: S M L XL 2XL Facebook: Yes No

Are you currently a 4-H member? Yes No What county? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Non-members can apply to be counselors and are welcomed. They will be asked to join the Camp Counselor Club as a member)

Name of Club(s): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent name(s): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent phone number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Texting? Yes No

Please share why you would like to be a counselor: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Please share what qualities you would bring to the 4-H Camp staff: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

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Please list your experiences working with children 9 to 14 years old: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Have you attended 4-H Camp before as a camper? Yes or No What year(s) \_\_\_\_\_\_\_\_\_\_\_\_\_

Have you served as a Counselor at a 4-H Camp? Yes or No What year(s) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(OPTIONAL) – Attach your resume to this application

As a camp counselor, I commit myself to:

1. Being a good role model and example at all times. Being interested in all activities.
2. Get to know the members of my group, the best I can. Help them get acquainted with one another. Treat all campers the same. Respect differences.
3. See that all members of my group become involved or have a part in each activity.
4. Be willing to assist those in charge of the camp in any way I can. Be prompt for all meetings, meals, and activities.
5. Give up my personal interests, so that the needs and interests of the campers can be met, realizing that the campers come first. Be available to the campers at all times.
6. Not to hesitate to ask an adult for advice if I have a situation that I do not understand or need assistance with.
7. Try my best to create an atmosphere of fun and fellowship so strong that everyone in my group will want to attend camp again next year. Keep good spirit, cheerful and positive attitude.

Signature of Teen: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

NOTES:

*You* ***MUST*** *attend Camp Counselor Training sessions in order to be considered as a counselor. You must let us know if you cannot attend a training prior to the scheduled date; preferably via email.*

ALSO completing this application **does not** guarantee you a spot as a counselor. Counselors are selected based on their application, leadership qualities, maturity and participation in training opportunities.

**TRAINING DATES:**

**January 8, 2017 - Informational meeting at the Huron Expo Center, 170 W. Soper Road, Bad Axe - 10:00 a.m. to 4:00 p.m.**

**April 7-9, 2017 – 4-H Teen Counselor Retreat at Camp Cavell**

**June 5, 2017 - Final 4-H Counselor Training before 4-H Camp**

**APPLICATION DEADLINE IS: Friday, December 16, 2016**

Please return application to:

MSU Extension-Huron County

1142 S. Van Dyke, Suite 200

Bad Axe, MI 48413

Phone: (989) 269-9949, ext. 604

Fax: (989) 269-7221

Email: [verelle7@anr.msu.edu](mailto:verelle7@anr.msu.edu) (preferred)