



Dear Potential CIT and Parents,

TEAMWORKS will once again be offering our training program for inspired young adults entering 8th to 11th grade who may be interested in being future camps counselors, childhood educators, or who enjoys being in a leadership position. This program will equip CIT's with leadership skills and knowledge they will use for the rest of their lives. In a safe and friendly environment TEAMWORKS will provide your child with skills such as problem solving, understanding accountability and responsibility, working together as a team and most importantly a real work experience.

During this program, CITs will learn skills in a safe environment through a combination of fun and challenging group sessions. CIT's will experience a classroom type setting and then apply skills alongside with experienced counselors leading games, activities, and more. CITs will also get hands-on experience working with kids. Supervised by counselors, CITs will be assigned to a camp group and will be rotating with them for various programs and activities.

**Teamworks Counselor-in-Training program is offered:**

- Camp Week 3 (June 24 - 28)
- Camp Week 4 (July 1 - 5)
- Camp Week 6 (July 15 - 20)
- Camp Week 7 (July 22 - 26)
- Camp Week 9 (August 5 - 9)
- Camp Week 10 (August 12 - 16)

FEES: CITs are considered regular campers and fall under the same policies our other camper. The CIT fees are \$225 for 1-weeks and must have a valid Teamwork's Youth Membership as well (Youth Membership \$20). Membership is required for all Summer Camp Participants.

CITs are encouraged to register for multiple weeks of the program that fit their summer schedule.

If you are interested in becoming a CIT, please complete this application. Once your application is completed, please send or submit it to 30 Great Road, Acton MA 01720 before June 10, 2019.

After we receive the application, we will contact you to set up an interview. Interviews will take place during the month of May/June.

If you have any other questions, don't hesitate to e-mail me or give us a call.

**Sincerely,**

**Sarah Mallard**  
**Camp Director**

[smallard@twcenters.com](mailto:smallard@twcenters.com)

30 Great Road Acton MA 01720

[www.TEAMWORKSACTON.com](http://www.TEAMWORKSACTON.com)



# Counselor-in-Training Application

Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

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

City/State/Zip Code: \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_

I will be entering \_\_\_\_\_ grade in the Fall 2019 at \_\_\_\_\_

1. Please list any extracurricular activities you participate in (Sports, Clubs, Hobbies, Leadership, etc.)

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2. What qualities do you feel a good counselor should have?

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3. Why do you want to be a CIT at Teamworks?

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4. What is your experience working with kids?

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5. What do you hope to learn from being a CIT?

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6. Have you ever attended Summer Camp? \_\_\_\_\_

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## Summer Camp Counselor-In-Training Reference Form

**Applicant Name:** \_\_\_\_\_

The applicant above is being considered to join our summer camp team as a Counselor-in-Training for TEAMWORKS Acton. We are looking for individuals who truly enjoy spending time with children, are dedicated to learning, and who are willing to put in the time and effort to create a fun and safe environment for our campers. We appreciate your thoughts and confidential insight. Please return completed forms to:

ATTN: CIT PROGRAM  
TEAMWORKS ACTON  
30 Great Road  
Acton, MA 01720

How long and under what circumstances have you known the above applicant?

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Please rate the applicant in the following categories on a scale of **1-5** (1 = poor and 5 = exceptional)

Observance of Rules	1	2	3	4	5
Confidence/Self Esteem	1	2	3	4	5
Work Diligence	1	2	3	4	5
Maturity	1	2	3	4	5
Teamwork	1	2	3	4	5
Social Presence	1	2	3	4	5
Communication Skills	1	2	3	4	5
Leadership	1	2	3	4	5
Problem Solving Skills	1	2	3	4	5

Would the applicant be a good role model and caregiver to children?                      Yes                      No

Please list any other information you feel we should take into consideration about the applicant.

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Completed By:

Name: \_\_\_\_\_

Position/Title: \_\_\_\_\_

Contact Phone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_