

APPLICATION FOR LEADER-IN-TRAINING PROGRAM

Teens, ages-14-16, who exhibit leadership potential and have the desire to work in a camp setting, may be selected to participate in this Volunteer program. An *application and interview* are required for consideration.

LIT Schedule 2023

The LIT program is conducted in self selected weekly sessions August 7 - August 25, 2023.

Former CIT program participants who are not old enough to apply for a counselor position are able to self-select weekly sessions for the full summer June 12-August 25, 2023

Leader-in-training Program

The LITs will be assigned to a senior counselor working towards their goals and getting hands-on experience. Each Senior Counselor will evaluate the LITs in order for them to improve and enhance their experience.

Leader-in-training Fees

The LIT program is a volunteer opportunity and is free to all participants.

Leader-in-training Application Process

- 1. Leader in Training Applicant (not your parent/guardian) needs to fill out the LIT application
- 2. The Camp Director or CIT Counselor will contact you to schedule an interview.
- 3. Once your interview is complete we email you a letter regarding the status of your application. If you are accepted into the program it will include a list of what to bring. If you have not been accepted into the program the letter will include a way to indicate how your refund should be processed.
- 4. Once the program is complete you will receive a certificate of completion and a final evaluation.

LIT APPLICATION to be filled out by the applicant, not the parent/guardian

Name	Pronouns	Date of Application	/	/
Email Address				

Permanent Address				
Permanent Telephone Nu	mber	Date of	Birth	
Have you ever been convicted of any crime, including child abuse or sex abuse crimes? YES ()				
If yes, explain. And list the	ne court and doc	ket number		
When working directly w	rith children, ple Age Age	s 3-4		o two)
	cation	Course of Study	Dates	
VOLUNTEER WORK Agency Supervisor	Position	Address	Phone #	Dates
CAMP/RECREATION Camp Position	EXPERIENCI Superviso		or participant) Phone #	Dates
CERTIFICATIONS Please describe any certif	ications or train	ing that may be useful	for a LIT experience.	
Name of Certification	Issu	ing Organization	Ext	piration Date
First Aid			*	
CPR				
Water Safety Instructor				

Life Guard Training		
Other Certifications or Training		
Ç		
OFFICE RELATED SKILL Check Skills/Experience with the f () Fax Machine () Copier Computer Skills: Word Processing Spreadsheet Database		
"2" Those activities in which	you can organize and instruct independent you can assist or co-instruct. you have experience or an interest in.	tly.
ARTS AND CRAFTS	Sailing	Marine Biology
Batik/Tie Dyeing	Swimming Lessons	Geology
Beading	SWIIIIIIII Dessons	Weather
Candle Making	CHALLENGE COURSE	Wildlife
Clay/Ceramics	High Ropes	Other
Leather Craft	Low Ropes	Other
Nature Crafts	Initiatives	OUTDOOR LIVING SKILLS
		
Painting	Cooperative Games	Backpacking
Weaving		Fire Building
Woodworking/Carving	ENVIRONMENTAL	Hiking
Other	EDUCATION	Knot tying
A OXIATING	Astronomy	Low Impact Camping
AQUATICS	Birds	Orienteering
Canoeing	Conservation	Outdoor Cooking
Kayaking	Forest Ecology	Shelters
Life Guarding	Flowers/Trees	Survival
River Rafting	Insects	Trip Leading
Other		
	PERFORMING ARTS	
SPORTS/GAMES	Creative Dancing	
Archery	Creative Drama	
Baseball/Softball	Folk/Square Dancing	
Basketball	Native American History	
Frisbee Golf	Instrument(s)	
New Games	Line Dancing	
Parachute Activities	Play Directing	
Soccer	Song Leading	
Volleyball	Skits	
Ultimate Frisbee	Story Telling	
Other	Other	

SUPPLEMENTAL QUESTION					
Please answer, on a separate sheet of paper, the following:					
ALL APPLICANTS 1. What contribution can you make as a Leader in Training at Camp Ketcha? Include why you want to work					
in a camp setting.2. Do you feel that you would be a good role model for children and why?3. Please describe your previous experience with children.					
J. Trouse desertee your provides on provid					
I CERTIFY THAT THE FACTS CONTAINED IN THIS APPLICATION ARE TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND UNDERSTAND THAT, IF ACCEPTED INTO THE PROGRAM, FALSIFIED STATEMENTS ON THIS APPLICATION SHALL BE GROUNDS FOR DISMISSAL.					
SIGNATURE	DATE				
Please return this application to:					
CIT APPLICATION Camp Ketcha					
336 Black Point	t Road				
Scarborough, MI	E 04074				