

HEART OF KANSAS 4-H CAMP COUNSELOR APPLICATION 2018



Return this application to your local extension no later than May 1st!

Na	Name: 4-H Age:	Years in 4-H:	
Ma	Mailing Address:		
Em	Email: Cell Phone	#:	
Co	County: Grade just	Grade just completed:	
Ple	Please answer the following questions completely. If hand wri	tten, please write neatly and legibly. If you need	
ado	additional space, feel free to continue on an additional page.		
1.	1. Why do you want to be a 4-H camp counselor?		
	-	-	
	-	-	
2.	2. Why are counselors important to the camping experience?		
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3.	3. In your opinion, what is the most important trait of a camp coul	iselor and why?	
4.	4. What non-camp experiences have you had working with childre	n?	
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5.	5. Have you served as a camp counselor before? Check: All Mand H. If non 4 H. places explain:		
	Check :4-HNon4-H If non 4-H please explain:_ Year(s):		
6.	6. Have you attended camps before?		
	Check :4-HNon4-H If non 4-H please explain:_		
	Year(s):		
7.	7. Heart of Kansas Counselor Experience:		
	Check one: This will be my first year to serve as a counseld	or at Heart of Kansas	
	This is my second year to serve as a counselor		
_	I have been a counselor at Heart of Kansas mo	re than 2 years	
8.	8. Do you prefer to work with?	th th	
	Elementary (1 st - 2 nd grades)Elementary (3 rd -5 th grades) Junior High (6 th -8 th grades) orEither	

9.	Please mark your t-shirt size: S M	LXLXXL	
10.	I would like to serve on the following committee(s Counselor Training Planning Committee Talent Show Committee Flag Raising/Lowering Campfire Songs and Energizers	s): Please rank them 1 through 5, 1 being your favorite.	
11	Please list two references, not related to you, that take initiative, etc.	can attest to your ability to work with children, follow directions,	
	Name:	Name:	
	Phone:	Phone:	
	How do you know this person?	How do you know this person?	
COL CA ASS SPI % % % % % % % % % % % % % % % % % % %	contract contains the responsibilities and duties of the camp counselor while at 4-H camp. By signing the contract, the neselors agree to accept and carry out these responsibilities. MP COUNSELOR GENERAL RESPONSIBILITY Time responsibility for a group of campers from several counties for 24 hours a day during camp. CIFIC DUTIES Counselor Job Description, Code of Conduct, and Counselor training material apply. Participate in camp counselor training session (June 8th) Know where your campers are at all times (including free time) and be present at critical times. Promote a helping relationship by interacting with your living group at all times during camp. Be aware of health, safety and well-being of your campers. Check for illness or injury. Report major health problems to camp health professional. Supervise taking medicine when appropriate. See that you, your living group and fellow counselors know and observe camp rules. Help your living group follow the daily camp schedule. Be sensitive to camper's personalities, differences and needs. Be aware that your living group will copy your behavior.		
We	e agree to accept the above responsibilities and sup	port our peers and agents while at camp.	
Co	unselor's Signature:	Date:	
_	ent's Signature: ent's Notes to Housing Committee:	Date:	
Age	ents: Turn this application into Robyn Deines by N	Nay 3rd for Camp Counselor Training responsibilities.	