



**VOLUNTEER APPRENTICE COUNSELOR
APPLICATION**

PERSONAL

Name _____ Phone _____

Address _____ Shirt Size _____

City, State, Zip Code _____

Parent/Guardian Name _____ Work Phone # _____

Age _____ (Must be 14 years old by June 1) E-mail _____

How did you hear about Camp Winnebago's Apprentice Counselor Program?

EDUCATION

School _____ Grade _____

What extra curricular activities are you involved in? _____

EXPERIENCE

Camping. Please list all of your camping experience.

	<u>Where</u>	<u>Years</u>
Camper	_____	_____
	_____	_____

Other Camp Experiences (Scouts, etc.) _____

Volunteer. Please list the volunteer experiences you have been a part of.

REFERENCES

Please list three references, other than relatives, we may contact with questions about your values, character and leadership abilities.

	<u>Name</u>	<u>Address/Zip Code/Phone</u>	<u>Occupation</u>
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____

QUESTIONS

Please answer:

1. In your opinion, what makes a good leader?

2. What do you think are the most important parts about summer camp?

3. Why are you applying for an apprentice counselor position?

BACKGROUND

Have you ever been convicted of a misdemeanor? Yes No

If yes, explain _____

Have you ever been convicted of a felony? Yes No

If yes, explain _____

(Such conviction may be relevant if position-related, but does not bar you from a volunteer position.)

Have you ever been the perpetrator of sexual abuse or child neglect? Yes No

If yes, explain _____

The YMCA has a No Smoking policy that includes, but is not limited to, all YMCA facilities and YMCA property, and is applicable during all YMCA programs held in non-YMCA facilities or on non-YMCA property. If you are accepted as a volunteer, do you agree to abide by this policy? Yes No

AGREEMENT

I certify that all the above answers are true and correct to the best of my knowledge and belief. I hereby authorize investigation of all statements contained in this application form. I understand that misrepresentation or omission of facts on this form is cause for disqualification of employment or dismissal if accepted.

I agree to abide by all the policies, rules and regulations of the YMCA and Camp Winnebago.

Signature _____ Date _____

Please return with payment by May 15:

Brad Cripe, Camp and Adventure Director
Camp Winnebago
5804 North Main Street
Rockford, IL 61103