TOWN OF HARWINTON PARKS & RECREATION DEPARTMENT

100 Bentley Drive Harwinton, CT 06791

COUNSELOR IN TRAINING 2022 APPLICATION

NAME			
first	last		
ADDRESS			
street	town	state	zip code
EMAIL ADDRESS			
TELEPHONE (CELL)	(HOME)_		
BACKO	GROUND/INTEREST	TS.	
School most recently attended:		current grade	
School Activities (clubs, sports, etcplease list) _			
Other Interests, Activities			
Training/ Skills/ Certificates			
Volunteer Experience			
Use the space below to explain why you would Playground as a Counselor-in-Training.			

REFERENCE

The "Counselor in Training Reference Form" should be completed by someone other than a relative, and returned by email to: recreation@harwinton.us or

by mail to: Harwinton Parks & Recreation Camp Supervisor, 100 Bentley Drive, Harwinton, CT 06791

PLEASE READ AND SIGN CERTIFICATION AND RELEASE

CERTIFICATION AND RELEASE

I certify that there are no misrepresentations, omissions or falsifications in the foregoing statements and answers. I further certify that the responses given are true, complete and accurate to the best of my knowledge and are made in good faith. I understand that any misrepresentation, omission or falsification may be grounds for rejection of my application or, in the event that I am hired, immediate discharge.

I authorize the Town of Harwinton to contact all of the educational institutions, employers, personal references included in this application and others the Town may deem necessary to obtain information related to my application for volunteer employment. I authorize all such contacts noted above to provide information to the Town of Harwinton and I hereby release the Town of Harwinton and all such persons and/or entities supplying such information from any and all liability and/or damages arising out of the release or use of such information.

I understand that upon acceptance as a Counselor-in-Training, I release the Town of Harwinton, employees of the Town of Harwinton, elected or appointed officials of the Town of Harwinton or other representatives of the Town of Harwinton from any and all liability.

APPLICANT'S NAME		
APPLICANT'S SIGNATURE	DATE	

Please check all the weeks you are available. A minimum two week commitment is preferred. Camp will be held Monday-Friday, 8 am-1 pm.

o June 27-July 1

o July 18-22

o July 5-8

o July 25-29

o July 11-15

o August 1-5

Select your T-shirt size (adult sizes): small medium large

This is an **unpaid position** for students completing 8th & 9th grade or 14-15 years old.

Submit Application and Reference Form for "Counselor in Training" by May 20, 2022 to:

Parks & Recreation Camp Supervisor Town of Harwinton 100 Bentley Drive

Harwinton, CT 06791

or email to: recreation@harwinton.us

Town of Harwinton Parks & Recreation Department 100 Bentley Drive Harwinton, Connecticut 06791

Counselor in Training Reference Form

This form is to be completed by someone other than a relative of the applicant and returned no later than May 20, 2022 to: Harwinton Parks & Recreation Camp Supervisor, 100 Bentley Drive, Harwinton CT 06791 or email to: recreation@harwinton.us.

Applic	ant Name
1.	How do you know the applicant?
2.	Do you think the applicant will be a good role model for younger children in a summer camp setting? Why?
3.	Is the applicant respectful and courteous to others, including peers and authority figures?
4.	Have you observed the applicant in a leadership role? Please share examples.
5.	What is your overall impression of the applicant and would you recommend this individual for a counselor in training position?
Name:	Signature: