

ST. CHARLES PARKS & RECREATION DEPARTMENT  
1900 RANDOLPH  
ST. CHARLES MO 63301  
[WWW.STCHARLESPARKS.COM](http://WWW.STCHARLESPARKS.COM)



Spring 2012

Thank you for your interest in the Summer Fun Day Camp “Counselor in Training” (CIT) program.

We are looking for CIT’s who are 15 years of age or will turn 15 by August 31, 2012

Please complete the enclosed application and return it with at least two or more letters of recommendation from a teacher, counselor, or church official or someone other than a family member. We ask that the recommendation be accompanied by a phone number and the best time to return a call.

Address to:

St. Charles Parks & Recreation Department  
1900 Randolph  
St. Charles, MO 63301  
Attn: CIT Application

After the application has been received and processed we will contact you. Thank you for your interest.

Sincerely,

Amanda Mejia  
Recreation Specialist

**COUNSELOR IN TRAINING RECOMMENDATION** (Request from 2 different non family members)

The below named candidate has applied for our CIT program for the St. Charles Parks & Recreation Department. Please complete and return to Attn: CIT Application, Camp Coordinators, St. Charles Parks Department, 1900 Randolph, St. Charles, MO 63301.

We thank you for your time and input.

CANDIDATES NAME \_\_\_\_\_

Please circle 1 thru 5 with 1 the lowest and 5 the highest.

- |    |   |   |   |   |   |   |
|----|---|---|---|---|---|---|
| 1. | Candidate is a responsible person.                      | 1 | 2 | 3 | 4 | 5 |
| 2. | Candidate gets along well with their peers.             | 1 | 2 | 3 | 4 | 5 |
| 3. | Candidate works well with authority figures.            | 1 | 2 | 3 | 4 | 5 |
| 4. | Candidate takes initiative to complete a task.          | 1 | 2 | 3 | 4 | 5 |
| 5. | Candidate is prompt and ready to work at starting time. | 1 | 2 | 3 | 4 | 5 |
| 6. | Candidate is creative.                                  | 1 | 2 | 3 | 4 | 5 |
| 7. | Candidate is respectful and considerate of others.      | 1 | 2 | 3 | 4 | 5 |
| 8. | Candidate's maturity level.                             | 1 | 2 | 3 | 4 | 5 |

Please briefly describe why you feel this candidate would be an asset to our program.

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Name \_\_\_\_\_ Position \_\_\_\_\_ Phone \_\_\_\_\_

Best time to contact: \_\_\_\_\_

**COUNSELOR IN TRAINING APPLICATION**  
(CIT's)

NAME \_\_\_\_\_ BIRTH DATE \_\_\_\_\_

ADDRESS \_\_\_\_\_ ZIP \_\_\_\_\_

PHONE NUMBER \_\_\_\_\_

MOTHER'S NAME \_\_\_\_\_

FATHER'S NAME \_\_\_\_\_

Any medical conditions that we should be aware of? \_\_\_\_\_

\_\_\_\_\_

Reason for interest in the CIT Program. \_\_\_\_\_

\_\_\_\_\_

Have you ever attended summer camp? \_\_\_\_\_

Have you worked with younger children in any way? \_\_\_\_\_

Name of school and grade you attend. \_\_\_\_\_

Extra\_curricular activities that you enjoy and have participated in. \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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