Camp Stuff-Ta-Doo & Koala Kids Day Camps Junior Counselor Program 2020

The Junior Counselor initiative is a pre-counselor training program for youth ages 14-15, which focus upon gaining the skills necessary to become a camp counselor.

Why Be a Junior Counselor?

- Gain a behind-the-scenes experience of the camp community.
- Establish job and character references.
- Personal growth and expanded self-esteem through leadership opportunities.
- Ability to work with children and adults in a camp community.

Eligibility:

- Must be between the ages of 14-15 during the summer of 2020 by June 30, 2020.
- Must be energetic, motivated and willing to work with young children.
- Must have completed form/application.
- Must be committed to volunteer at least 6 weeks of Day Camp.

Application Procedure:

This packet contains all necessary information. It is available online at www.simsburvrec.com

There is an application process for this program to ensure the Junior Counselors have the desire to participate fully and be a positive role model during this program. In addition to the Application, a brief interview will be scheduled for each applicant.

- To be eligible for the program, interested participants must complete the application, reference, waiver forms and return them to the Simsbury Rec Dept. by **May 1, 2020.**
- Position is not guaranteed until confirmed by the Recreation Director. The Simsbury Recreation
 Department reserves the right to reject an applicant or limit the number of applicants accepted
 into the program based on day camp program's needs.

Responsibilities:

- Campers Come First!!! Set a good example by being a positive role model.
- Assist Camp Counselors with daily activities, such as, crafts, games, hikes, experiments.
- Associate with campers **NOT** other junior counselors.
- Be punctual, attend and be an active part of all camp programming, participants must be able to attend 100% of the sessions enrolled in.
- Abide by all rules, policies and procedures.
- Treat all campers equally, there should be no favorites
- Be cooperative with the camp counselors, your peers, and the campers.
- Be enthusiastic and have a positive attitude.

CAMP STUFF-TA-DOO & KOALA KIDS DAY CAMPS Junior Counselor Application 2020

Name:							
Las	t		First			Middle	Initial
Camp Expe Have you ev		nper at a Simsbury I	Recreation Dept.	Summer Day	Camp?	Yes	□No
Have you att	ended other o	camps as a camper?	Yes	\square No			
Camp Name	:		Number of	years:			
Camp Name	:		Number of	years:			
Have you ev	er been a Jun	ior Counselor (JC)	or Counselor in T	raining (CIT) before?	\Box Yes	\square No
Camp Name	:		Number of	years:			
Position:		Duties:					
Please circle	full weeks yo	ou are available (mu	st be able to com	ımit to at lea	<u>st</u> 6 weeks, ir	ncluding 1	of the first 2
June 22-June	26	June 29-July 3	July 6-Ji	uly 10	July 13	- July 17	
July 20- July	24	July 27- July 31	Aug. 3-	Aug. 7	Aug. 10) -Aug. 1	4
Please answe		ize: AS and questions with a state to be a Junior Cou				•	•
2. If y	ou are selecte	d to be a JC, what p	personal qualities	do you have	that will mak	ke you a g	good JC?
	me someone t d leader.	hat you know to be	a leader, please o	lescribe the c	haracteristics	that mak	e that person
Participant Ag	reement						
participating in stolen or damag	ged personal artic	he Summer Day Camp P les. I also authorize the n this registration, which	Simsbury, Culture, P	ry Culture, Park arks & Recreation	s & Recreation I on Department to	Dept. is not a use photog	responsible for lographs, recorded

Date

Parent/Guardian Signature (Required)

TOWN OF SIMSBURY Applicant Information and Release of Liability

Disclosure:

The Town of Simsbury's Junior Counselor at Camp Stuff-Ta-Doo and Koala Kids Camp involves a variety of activities and challenges that include, by not limited to: games, initiatives, hiking, canoeing, use of the camp's recreation facilities and possibly off site travel, which is provided by contracted bus companies. There is risk involved in all activities associated with participants and the participant of the program assumes the risk. It is the policy that all participants have health insurance coverage. Information on this coverage must be made known to the instructors of the program prior to the onset of all activities. All information will be kept confidential.

COIIII	ential.				
Applic	eant Information:				
1.	Name:				
2.	Full Address:				
3.	Daytime Phone Number:				
4.	Evening Phone Number:				
5.	Emergency Phone Number:				
6.	6. Date of Birth:				
7.	Name of Insurance Company:				
Releas	e of Liability:				
Depar and m profes guidel travel. Volun	rstand that the Junior Counselor Program with the Simsbur tment and the activities associated with being a Junior Coun entally demanding. I affirm that I am in good health and the sional care for any condition that will limit my ability to sa ines. I recognize the inherent risk of injury that could result I release the Town of Simsbury, Town Staff, Simsbury Su teers, and Campers of liability for any injury that may occur elor at the Camp Stuff-Ta-Doo and Koala Kids Day Camp	nselor may be both physically nat I am not under any fely participate with the lt during activities, and off site namer Day Camp Staff, or to me during the Junior			
Applic	eants Signature:	Date:			
Parent	/Guardian's Signature:	Date:			

JUNIOR COUNSELOR PARTICIPANT EMERGENCY INFORMATION

General Information:

Name:	Date of Birth:	Age:
Address:	Grade In Fall:	
Home Phone:	Work Phone (Parent/Guardian):	
Parent/Guardian Name(s):	Cell Phone (Parent/Guardian):	
In the case of an emergency, please n	otify:	
1.) Name:	Phone Number(s):	
2.) Name:	Phone Number(s):	
3.) Name:	Phone Number(s):	
Family Physician:	Phone Number(s):	
•	Parks and Recreation Staff to be fully awar ions of your child, as well as any medicati	_
Please list and briefly explain the following	owing:	
Chronic or serious illness:		
Allergies:		
Current Medications:		
Prior Injuries:		
Has your child ever had a bee sting?	YES NO Reaction:	
emergency exists, our policy is to ca	Parks and Recreation Dept. staff determall 911 and then we will call the three experienced, the second will be tried, and	emergency contacts. If
and is able to fully participate in all	nild is in g Camp Stuff-Ta-Doo and Koala Kids I the medical procedures as described ab	Day Camp activities. I
Parent/Guardian Signature:		Date:

CAMP STUFF-TA-DOO & KOALA KIDS DAY CAMPS Junior Counselor Reference Form 2020

Applicants			
Full Name:			
	Last	First	Middle Initial
Instructions :			
Applicant: P	lease fill in your name	e above, and give a copy of t	this form to two (2) references.
Please do not	use family members.		

Applicant's Reference: The above is volunteering for a position with the Simsbury Recreation Department's summer day camp program. As part of the camp community, it is important that each individual demonstrates a mature attitude toward leadership and a responsible concern for the safety and well being of the campers. Please rate this person accurately and as honestly as possible. Your responses will be kept confidential. Return both pages of the reference form to Simsbury Recreation Department, 933 Hopmeadow Street. Simsbury, CT, 06070 Attn.

Junior Counselor Program, by May 1, 2020. The form may be return by fax to 860-408-9283.

Thank You!

Personal Reference

Please rate individual on the items below:	Excel- lent	Very Good	Good	Fair	Poor	No Info
Leadership: Easily take on a role of a leader and motivates others.						
Responsibility: Makes decisions that reflect good judgment.						
Dependability: Completes work with minimal supervision						
Integrity: Displays convictions to a positive set of values.						
Cooperative: Shows willingness to work as a team member.						
Maturity: Exhibits positive attitude when dealing with relationships.						

CAMP STUFF-TA-DOO & KOALA KIDS DAY CAMPS Junior Counselor Reference Form 2020

Applicants			
Full Name:	Last	F' (
	Last	First	Middle Initial
Comments:	nt on the annlicant's	raadinass to work as a Iu	nior Counselor as part of our
	amp community.	readifiess to work as a su	inioi Counscioi as part of our
·			
How long have	e you known the app	olicant?	
What is your ro	elationship to the ap	plicant?	
, ,	т т т т т	r	
Vour Name		Title	
Tour Marie		Title	
Organization:		Phone N	umber
Address:			
Signature:		Da	ate:

Thank you for your time and cooperation!