



PARKS, RECREATION, & COMMUNITY EDUCATION

# Counselor-In-Training Application Packet

**2020**



Town of Littleton

**Department of Parks, Recreation & Community Education  
33 Shattuck Street  
Littleton, MA 01460**

February 2020

Dear Prospective Counselor-In-Training (CIT) Participant,

We are excited that you have made the decision to apply for one of our *Counselor-In-Training* (CIT) positions for the upcoming 2020 Season. The CIT Program is an important part of Camp Tahattawan, and our intention is to choose qualified and motivated candidates from the applicant pool. You have the ability to gain and further develop a variety of skills through the real-life experiences and practical applications offered by this program. These experiences can help you in your schooling and assist you in obtaining employment opportunities in the future—maybe even as a counselor for our Department!

We offer fourteen slots per week for the Camp Tahattawan Program. Since this is a popular program, we encourage you to look at all the requirements and thoughtfully fill out the CIT Information Packet in its entirety *well before* the deadline.

**Steps to becoming a CIT:**

- 1) Fill out and return Application Questionnaire & Reference Page
- 2) Schedule an interview with PRCE staff member for May or early June
- 3) **Return required forms by May 8th, 2020:** Registration Form, Family Record Form, Medical Authorization Form, a copy of a current Well-Visit Physical, and a current Immunization record
  - a. **If your packet is not complete, you cannot be accepted into the program**

If accepted, each CIT will be trained in program specifics as well as child-play guidelines and camper games. In addition to camp specifics, this session will also give you valuable information on the Department's policies and your expected duties for a successful summer season at Camp Tahattawan. You will be given specific information about training dates, uniforms and scheduling at the time of the interview.

The Complete CIT Packet is available online at [www.littletonrec.com](http://www.littletonrec.com) where the forms can be downloaded, or you may get one at the office during our normal business hours. Applications received after April 10th, will be reviewed and considered last, and you may not have an opportunity to be a CIT.

Please feel free to contact me at the Parks, Recreation and Community Education Office at (978) 540-2490 if you have any questions or difficulties with the application.

Thank you,

*Alea Corbin*

Alea Corbin, Recreation and Sports Program Coordinator  
Parks, Recreation & Community Education

**Personal Information:**

Name: \_\_\_\_\_ Date of Birth: \_\_/\_\_/\_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Home/Other Phone: \_\_\_\_\_

Grade in Fall 2019: \_\_\_\_\_ School: \_\_\_\_\_

Household Main Email Address: \_\_\_\_\_

**Emergency Information:**

Allergies: \_\_\_\_\_

Swimming Ability?      POOR      FAIR      GOOD      GREAT

Special Diet Information?  
\_\_\_\_\_  
\_\_\_\_\_**Program Information:*****What weeks are you applying for? Please number your preferred weeks in order of choice/preference.*****WEEK A is not an option because it has been canceled due to snow days.**

- WEEK B:      6/29 – 7/3
- WEEK C:      7/6 – 7/10
- WEEK D:      7/13 – 7/17
- WEEK E:      7/20 – 7/24
- WEEK F:      7/27 – 7/31
- WEEK G:      8/3 – 8/7
- WEEK H:      8/10 – 8/14

**\*\*THERE IS A 4 WEEK REGISTRATION MAXIMUM FOR THE CIT PROGRAM\*\***



8. List three adjectives that describe you:

a. \_\_\_\_\_

b. \_\_\_\_\_

c. \_\_\_\_\_

9. Name three of your favorite hobbies:

a. \_\_\_\_\_

b. \_\_\_\_\_

c. \_\_\_\_\_

10. Do you have any special skills or talents?

11. Who is your hero and why?

12. Have you ever done volunteer work? If so, what and when?

13. Is there anything else you would like us to know about you that would help us make the decision on whether or not to accept you into the CIT Program?

**Interview Information:** Every new CIT will need to schedule an interview with PRCE staff; *returning CITs do not need to interview again.* A PRCE staff member will contact you to schedule a time to come in to the PRCE Office. Interviews will be held in May and June.

**For Office Use Only:**

**Date Received:** \_\_\_/\_\_\_/\_\_\_      **Received By:** \_\_\_\_\_

**Date Reviewed:** \_\_\_/\_\_\_/\_\_\_      **Reviewed By:** \_\_\_\_\_

**Interview Scheduled?** YES NO      **Interview Date:** \_\_\_/\_\_\_/\_\_\_      **Interview Time:** \_\_\_\_\_

**Interview Confirmed?** \_\_\_/\_\_\_/\_\_\_      **Confirmed By:** \_\_\_\_\_

**Interview Comments:**

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# REFERENCES PAGE

Please provide us with the names and information for three (3) references (not related or living with you) that we may contact on your behalf:

1. **Name:** \_\_\_\_\_  
**Address:** \_\_\_\_\_  
**Phone number:** \_\_\_\_\_ **Email:** \_\_\_\_\_  
**How long have you know this person?** \_\_\_\_\_  
**In what capacity do you know this person?** \_\_\_\_\_  
\_\_\_\_\_

2. **Name:** \_\_\_\_\_  
**Address:** \_\_\_\_\_  
**Phone number:** \_\_\_\_\_ **Email:** \_\_\_\_\_  
**How long have you know this person?** \_\_\_\_\_  
**In what capacity do you know this person?** \_\_\_\_\_  
\_\_\_\_\_

3. **Name:** \_\_\_\_\_  
**Address:** \_\_\_\_\_  
**Phone number:** \_\_\_\_\_ **Email:** \_\_\_\_\_  
**How long have you know this person?** \_\_\_\_\_  
**In what capacity do you know this person?** \_\_\_\_\_  
\_\_\_\_\_