



4-H CAMP COUNSELOR APPLICATION 2025



Return this application to your local extension no later than May 15th

Name: _____ 4-H Age: _____ Years in 4-H: _____

Mailing Address: _____

Email: _____ Cell Phone #: _____

County: _____ Grade just completed: _____

Please answer the following questions completely. If handwritten, please write neatly and legibly. If you need additional space, feel free to continue on an additional page.

1. Why do you want to be a 4-H camp counselor?

2. Why are counselors important to the camping experience?

3. In your opinion, what is the most important trait of a camp counselor and why?

4. What non-camp experiences have you had working with children?

5. Have you served as a camp counselor before?

Check: _____ 4-H _____ Non4-H _____ If non 4-H please explain: _____

Camp/Year(s): _____

6. Have you attended camps before?

Check: _____ 4-H _____ Non4-H _____ If non 4-H please explain: _____

Year(s): _____

7. Counselor Experience:

Check one: _____ This will be my first year to serve as a counselor

_____ This is my second year to serve as a counselor

_____ I have been a counselor for several years.

I want to be a counselor for:

_____ 4Clover Camp June 11-13

_____ Cedar Bluff Overnight Camp June 26-27

_____ I want to help with Day camps in WCD

8. Do you prefer to work with?

_____ Elementary (1st- 2nd grades) _____ Elementary (3rd-5th grades) _____ or _____ Either

9. Please mark your t-shirt size: _____ S _____ M _____ L _____ XL _____ XXL

10. Please list two references, not related to you, that can attest to your ability to work with children, follow directions, take initiative, etc.

Name: _____

Name: _____

Phone: _____

Phone: _____

How do you know this person?

How do you know this person?

AGREEMENT BETWEEN COUNSELOR, LOCAL EXTENSION OFFICE AND CAMP GROUP

This contract contains the responsibilities and duties of the camp counselor while at 4-H camp. By signing the contract, the counselor agrees to accept and carry out these responsibilities.

CAMP COUNSELOR GENERAL RESPONSIBILITY

Assume responsibility for a group of campers from several counties for 24 hours a day during camp.

SPECIFIC DUTIES

- ✿ Counselor Job Description, Code of Conduct, and Counselor training material apply.
- ✿ Participate in camp counselor training session at camp
- ✿ Know where your campers are at all times (including free time) and be present at critical times.
- ✿ Promote a helping relationship by interacting with your living group at all times during camp.
- ✿ Be aware of health, safety and well-being of your campers. Check for illness or injury.
- ✿ Report major health problems to camp health professional. Supervise taking medicine when appropriate.
- ✿ See that you, your living group and fellow counselors know and observe camp rules.
- ✿ Help your living group follow the daily camp schedule.
- ✿ Be sensitive to camper's personalities, differences and needs.
- ✿ Be aware that your living group will copy your behavior.

In the event of a serious rule infraction, those involved will meet with the camp disciplinary committee.

We have read the Code of Conduct and we agree to accept the above responsibilities and support our peers and agents while at camp.

Counselor's Signature:

Date:

Parent/guardian's Signature:

Date:

Agent's Signature:

Date:

Agent's Notes to Housing Committee:

Agents: Turn this application into Robyn Trussel by May 15th for Camp Counselor Training responsibilities.