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 ______ Non-4-H  If non 4-H please explain:______________________________________________
   Camp/Year(s): ____________________________________________

6. Have you attended camps before?
   Check: ________ 4-H ______ Non-4-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.

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 Camp Group:

__________________________________________________________________________________________________
__________________________________________________________________________________________________

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