



# COMO Counselor In Training (CIT) Application

NAME: \_\_\_\_\_ DATE: \_\_\_\_\_

ADDRESS:

\_\_\_\_\_  
(Number and Street)

\_\_\_\_\_  
(City, State, Zip Code)

HOME PHONE: \_\_\_\_\_ GRADE FALL 2026: \_\_\_\_\_

Your Email Address: \_\_\_\_\_

Which CIT Program are you applying for (check all that apply):

- Session 1: Camp Week 3 (July 6-10)
- Session 2: Camp Week 4 (July 13-17)
- Session 3: Camp Week 5 (July 20-24)
- Session 4: Camp Week 6 (July 27-31)
- Session 5: Camp Week 7 (August 3-7)
- Session 6: Camp Week 8 (August 10-14)
- Session 7: Camp Week 9 (August 17-21)
- Session 8: Camp Week 10 (August 24-28)

## PARENT/GUARDIAN INFO

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**IN CASE OF EMERGENCY, NOTIFY:**

\_\_\_\_\_  
(NAME & RELATION)

**Cell Phone:** \_\_\_\_\_ **Work Phone:** \_\_\_\_\_

**Email:** \_\_\_\_\_

PLEASE LIST **THREE REFERENCES:** (1 relative and 2 non-relatives)

1. \_\_\_\_\_

NAME

ADDRESS

PHONE #

2. \_\_\_\_\_

NAME

ADDRESS

PHONE #

3. \_\_\_\_\_

NAME

ADDRESS

PHONE #

\*\*\* Please have each of the references listed above complete the attached **Reference Questionnaire** and return it to the COMO with your application \*\*\*

PLEASE LIST ANY **CAMP EXPERIENCE:** (List your most recent experience first)

CAMP	YEAR	EXPERIENCE
_____		
_____		
_____		
_____		
_____		

The following is a list of some everyday camp activities you as a CIT would encounter. Please put a “1” next to any that you can assist in teaching. Put a “2” next to any that you are interested in learning about.

**Everyday Camp Activities**

- \_\_\_\_\_ Arts & Crafts (painting, art projects, jewelry, etc...)
- \_\_\_\_\_ Nature (hiking, nature crafts, environmental awareness, etc...)
- \_\_\_\_\_ Athletics (soccer, kickball, basketball, dodgeball, handball, etc...)
- \_\_\_\_\_ STEAM (science, technology, pottery, etc...)
- \_\_\_\_\_ Other, please list: \_\_\_\_\_

Which **age group** would you prefer to work with? Please rank them in order. (1 being your first choice)

- \_\_\_\_\_ 3-5 yrs. old      \_\_\_\_\_ K-1st      \_\_\_\_\_ 2nd-3rd      \_\_\_\_\_ 4th-5th
- \_\_\_\_\_ Middle School (6th-8th)

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**CERTIFICATIONS**

Please check any certifications you currently hold!

<b>Certification</b>	<b>Expiration</b>
_____ First Aid/CPR/AED	_____
_____ Epi-pen/Meds	_____
_____ Lifeguard	_____

**Please complete the following questions:**

1. What qualities do you think make an effective leader?

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2. How would a camper benefit from spending two weeks in camp with you?

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3. Give five good reasons the COMO would want to choose you as a CIT?

1) \_\_\_\_\_

2) \_\_\_\_\_

3) \_\_\_\_\_

4) \_\_\_\_\_

5) \_\_\_\_\_

4. What are your expectations of the CIT Program?

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5. Please include anything else you feel would help you gain admittance into the CIT program.

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## **Important Information:**

- Camp policy requires all CIT's to have a **current physical examination on file before** attending camp.
- Appropriate language is expected at all times. Failure to do so will result in expulsion from the program.
- CIT's are not allowed to use their phone or other electronic devices while in the program. Photos/videos of the campers is strictly prohibited. Failure to follow this rule will result in expulsion from the program.
- Completion of the CIT program does not guarantee a future staff position at the COMO. CIT's will be evaluated on their performance and feedback will be provided.
- The CIT program is a commitment! **ALL CIT'S MUST ATTEND AND COMPLETE THE FIRST TWO WEEKS OF TRAINING June 22-26 and June 29-July 2.**
- CIT applications must be completed and returned to the Stonington Community Center at 28 Cutler Street c/o TJ Faeth by June 5th.

**Being involved with our day camp program is a serious obligation. There is a strong responsibility to each child and as a CIT, you are expected to live up to the expectations of the program, which are as follows:**

- Responsibility for your own actions as well as those of your assigned group.
- To present yourself as a good role model for children.
- To respect each member of the COMO community, staff, campers, and fellow CIT's.
- To take your position at the COMO seriously and perform to the best of your ability.

**\*All CIT applicants must complete an application and go through an interview process before being accepted into the program- however, you may complete the registration form and pay the deposit prior to the interview!** For more information, please contact the COMO at 860-535-2476.

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**APPLICANT SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_**

**PARENT/GUARDIAN SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_**

**Please return this application and the 3 reference forms to the COMO by June 5th**



## **CIT Reference Questionnaire #1**

**Applicant's Name:** \_\_\_\_\_

**Reference's Name:** \_\_\_\_\_

This person has given your name as a reference that could elevate his/her character. Please give careful consideration to the questions asked about the applicant. **Remember that this individual will be a role model for a group of young children.** You as a reference are expected to answer openly and honestly about our leaders of tomorrow!

Please answer the following questions:

Describe the relationship you have had with this applicant and for how long?

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Why would this individual be a positive role model for children? Please Explain.

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How would the COMO benefit from having this individual as a CIT?

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Are you aware of any problems/concerns that might interfere with this applicant's ability to perform the CIT position?

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May we call for further information?            Yes            No

The COMO staff greatly appreciates your time and effort. Selecting a positive role model for children is no easy task! Your assistance in our program will make our difficult selection process easier, enabling us to choose the best candidates for the position. Thank you!

**Signed:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **Email:** \_\_\_\_\_



## **CIT Reference Questionnaire #2**

**Applicant's Name:** \_\_\_\_\_

**Reference's Name:** \_\_\_\_\_

This person has given your name as a reference that could elevate his/her character. Please give careful consideration to the questions asked about the applicant. **Remember that this individual will be a role model for a group of young children.** You as a reference are expected to answer openly and honestly about our leaders of tomorrow!

Please answer the following questions:

Describe the relationship you have had with this applicant and for how long?

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Why would this individual be a positive role model for children? Please Explain.

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How would the COMO benefit from having this individual as a CIT?

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Are you aware of any problems/concerns that might interfere with this applicant's ability to perform the CIT position?

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May we call for further information?            Yes            No

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**Signed:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **Email:** \_\_\_\_\_



## **CIT Reference Questionnaire #3**

**Applicant's Name:** \_\_\_\_\_

**Reference's Name:** \_\_\_\_\_

This person has given your name as a reference that could elevate his/her character. Please give careful consideration to the questions asked about the applicant. **Remember that this individual will be a role model for a group of young children.** You as a reference are expected to answer openly and honestly about our leaders of tomorrow!

Please answer the following questions:

Describe the relationship you have had with this applicant and for how long?

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Why would this individual be a positive role model for children? Please Explain.

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How would the COMO benefit from having this individual as a CIT?

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Are you aware of any problems/concerns that might interfere with this applicant's ability to perform the CIT position?

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May we call for further information?            Yes            No

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**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **Email:** \_\_\_\_\_