

YMCA of the Sandhills

LIT & CIT Registration/Application Process

The LIT/CIT program is an amazing program where teens gain a whole new sense of responsibility, critical thinking skills, caring for others, develop leadership and an unforgettable summer experience at the YMCA of the Sandhills.

The LIT/CIT registration process has a few steps that are different from a regular camper registration. Space is limited.

- Parent or Guardian, or LIT/CIT candidate will fill out the application form in full and return it via email to Chealsea.Sias@ymcaofthesandhills.org or drop a printed copy off to the front desk. To be considered to participate in the LIT Program, the completed application packet and recommendations must be submitted and phone interview completed. Deadlines will be noted in the email and must be followed to be considered for this competitive program. Candidate must demonstrate the skills, character and desire to be in the LIT/CIT Program.
- LIT/CIT candidate must submit a completed application and ONE professional letter of recommendation. This recommendation can be from any teacher, pastor, mentor, coach, former employer or volunteer coordinator.
- Once the application packet is submitted, the LIT/CIT candidate will need to complete a phone interview with Chealsea Sias, Youth Development Director. Chealsea will coordinate the interview time directly with LIT/CIT Candidate. Space is limited and program participation is competitive so it is important to meet all deadlines as required. Candidates will not be considered unless all required documents and interview have been completed.
- Once a decision has been made, BOTH parent and candidate will be notified and the registration process will be completed and payment method will be collected.

YMCA of the Sandhills

Leader In Training (LIT) Counselor In Training (CIT) Application

Applicants must be age 12 by June 1 for LIT and age 14 by June 1 to be CIT. CIT's must complete at least 5 weeks to be considered for hire.

Name	Prefers to be called
------	----------------------

LIT Information

Date of Birth	Cell Phone	Home Phone
School	Grade	E-Mail Address

LIT Parent Information

Parent/Guardian Name	Phone	E-Mail Address
Parent/Guardian Name	Phone	E-Mail Address

Please answer the following:

List the number of summers you've attended YMCA of the Sandhills. _____ I am new to camp _____
What is the last summer you attended? _____ I Have not attended YMCA of the Sandhills _____

Please answer the following questions – please print or type clearly.

1. Please list all of your previous leadership experience. Include volunteer work, employment, certifications, special skills, sports, clubs and other extracurricular activities.

2. Describe the perfect Camp Counselor.

3. This program is all about being a leader with children in a camp setting. Why do you want to work with children?

4. How can you contribute to the LIT/CIT Program as a team member?

5. What should the role of a LIT/CIT be at camp?

6. On a scale of 1 to 10, how invested are you into being in this program this summer? _____
Please explain your rating:

7. Would you like to work at camp one day? Answer Yes or No. Why or Why Not?

8. Why should you be selected for this program?

LIT/CIT Applicant Reference Form

Name of Applicant: _____

Date of Birth ____/____/____

Applicant Signature: _____

Date: _____

FOR REFERENCE TO COMPLETE:

The above applicant has applied for a position in YMCA of the Sandhills leadership programs. Serious consideration will be given to your comments so we ask that you complete this form carefully. Your early response will be most appreciated as the applicant's admission to the program is dependent on this form. We sincerely appreciate your cooperation.

Please return to applicant or submit directly to Chelsea Sias, Youth Development Director
Chelsea.Sias@ymcaofthesandhills.org.

Please check the following and comment where necessary:

Your relationship to the applicant: Pastor Employer Teacher Coach Other: _____

How well do you know the applicant: Very Well Well Casually Not Well

Would you hire this person to work with your children? Yes No

Please list the applicant's strengths:

Please rate the following and provide comments where necessary:

	Excellent	Good	Fair	Poor	No Observation	Comments
Initiative	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Self-Discipline	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Self-Image	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Ability to Work with Others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Concern for Others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Desire to Serve	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Ability to Manage Peer Pressure	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Work Ethic	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Dependability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Emotional Stability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Judgement/Decision Making	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Adaptability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Ability to Lead	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Ability to Follow	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Perseverance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Name: _____

Signature: _____

Date: _____