



## Bow to Stern Sailing School Counselor in Training (CIT) Program Application



The CIT program is a leadership development program designed to enrich the individual teen's life skills. Opportunities for growth will begin with the application where each candidate should complete the form(s) with little or no assistance. The interview will also be an independent process with each applicant speaking for him/herself. The completed application and interview experience will be reviewed and critiqued during the course of the program.

Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Parent Name: \_\_\_\_\_

Where Parent Work: \_\_\_\_\_

Parent Phone Numbers: Home \_\_\_\_\_ - \_\_\_\_\_ Work \_\_\_\_\_

Parent E-Mail: \_\_\_\_\_ CIT Email: \_\_\_\_\_

Birthday: \_\_\_\_\_ Year in School Next Fall: \_\_\_\_\_

School Attending: \_\_\_\_\_

How did you hear about the program? \_\_\_\_\_

Have you ever been a CIT? If so where? \_\_\_\_\_

Please answer the questions below and use additional paper if needed.

1. Please list any sports, clubs or hobbies you enjoy participating in, including leadership roles.
2. Please list any awards/honors you have received.
3. What are your top five strengths?
4. Describe your experience with children and give ages.
5. Please list any summer camps you have attended.
6. Describe any jobs, personal experiences or volunteer opportunities that would make you an effective CIT?
7. Why do you want to be a CIT?
8. What is your greatest asset?
9. Why should we select YOU to be a CIT?
10. Please include two references, one from a teacher and one from another adult that is not a relative.

Print Name \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_

Parent Name \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_