

2025 4-H Camp Counselor Application

*Due back to the Pike County Extension Office by *April 7th**-- Expect interviews to begin the week of April 21st with training dates TBA

Name _____ Birthdate _____ Age _____

Gender Male Female Telephone: _____ Shirt size _____

Home Phone: _____ Cell Phone: _____ Email: _____

Address: _____

Grade Completed Current Year: _____ No. of Years in 4-H _____

No. of Years Attending 4-H Camp: _____

No. of 4-H Events attended this year (ex. Teen Conference, Clubs, Fairs, Fundraisers, Teen Council):

Have you attended any other Camps? Please List.

List previous and current activities in school, church, and community.

List all leadership responsibilities you have had in 4-H, School, Church, or Community:

Why do you want to be a 4-H Camp Counselor?

Do you like working with children? yes no

I was chosen to go to camp last year as a:

CIT Teen Counselor Junior Camper Did not apply.

Activities: Check the ones you would feel comfortable working with.

- | | | | |
|---------------------------------------|-------------------------------------|--|--------------------------------------|
| <input type="checkbox"/> Basketball | <input type="checkbox"/> Archery | <input type="checkbox"/> Nature | <input type="checkbox"/> Recreation |
| <input type="checkbox"/> Fishing | <input type="checkbox"/> Riflery | <input type="checkbox"/> Dancing | <input type="checkbox"/> Canoes |
| <input type="checkbox"/> Volleyball | <input type="checkbox"/> Crafts | <input type="checkbox"/> Swimming | <input type="checkbox"/> Photography |
| <input type="checkbox"/> Foods | <input type="checkbox"/> Low Ropes | <input type="checkbox"/> Drama | <input type="checkbox"/> Derby Cars |
| <input type="checkbox"/> High Ropes | <input type="checkbox"/> Leadership | <input type="checkbox"/> Quiet Time Activities | |
| <input type="checkbox"/> Other: _____ | | | |

Do you hold any certifications such as: CPR, First Aid, ETC?

Please list: _____

List two adult references and ask them to write you a letter of recommendation, these individuals should not be related to you, and they should know your ability to work with children. *Complete addresses and telephone numbers are essential parts of your application.*

NAME	ADDRESS	OCCUPATION	TELEPHONE

REQUIREMENTS FOR THE POSITION OF CAMP COUNSELOR

- *Attend 4-H Camp Counselor Orientation
- *Attend 4-H Camp Counselor Training
- *Attend all mandatory counselor training sessions (If you are unable to attend a meeting you must make up all training.)
- *Any other direction given by the 4-H Agent appropriate for Counselor

Additional notes for Camp Counselor candidates:

- *Each Counselor (18+) will need to complete a background check before going to camp
- *Each Counselor will need to have a medical checkup/physical checkup before going to camp
- *Each Counselor will attend all training sessions before going to camp
- *Each Counselor will participate in a face-to-face interview before going to camp

I certify that the information I have provided is true to the best of my knowledge. I give the 4-H Extension Agent permission to secure information concerning my character as well as my abilities to work with children. I agree to attend 4-H Counselor Training. I also agree to abide by the 4-H Camp Rules.

Signature

Date