



# 4-County 4-H Camp COUNSELOR APPLICATION



For grades 9 and up  
(Use black or dark blue ballpoint pen or type)

**▶▶▶ Return by April 1st ◀◀◀**

**Limit answer to space provided on application**  
***(Late applications will not be accepted)***

**Camp dates are: Monday, June 25—Wednesday, June 27, 2018**

**Mandatory Camp Counselor Training: Friday, June 15th 9:00am—3:00pm at the  
UW-Extension Office in Montello**

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

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ ZIP: \_\_\_\_\_ HOME PHONE: \_\_\_\_\_

<b>PLEASE RATE IN ORDER YOUR TOP THREE AREAS OF PREFERENCE YOU WISH TO BE CONSIDERED FOR:</b>		
_____ CABIN COUNSELOR	_____ OUTPOST COUNSELOR	_____ CRAFTS
_____ NATURE	_____ RECREATION	_____ CAMP DIRECTOR
_____ CAMPFIRE/CEREMONY	_____ OTHER (SPECIFY): _____	

CLUB: \_\_\_\_\_ CELL PHONE: \_\_\_\_\_ AGE: \_\_\_\_\_

T-SHIRT SIZE (Specify youth or adult): \_\_\_\_\_ GRADE: \_\_\_\_\_ EMAIL: \_\_\_\_\_

I HAVE BEEN IN 4-H \_\_\_\_\_ YEARS.

I HAVE BEEN A 4-H CAMPER \_\_\_\_\_ YEARS.

I HAVE BEEN A 4-H CAMP COUNSELOR \_\_\_\_\_ YEARS.

OTHER CAMPING EXPERIENCES (Describe): \_\_\_\_\_

(1) What qualities do you have that would make you a good counselor? Please explain.

(2) What projects, hobbies or skills would you share with others at camp?

- (3) Every year camp has a theme (Wizard of Oz, Medieval, Around the World, etc.) What theme ideas do you have for camp? How would you apply that theme to the various areas at camp?
- (4) If you wish to be a resource counselor, what experiences (4-H and non 4-H) have you had related to the areas that you are interested in?
- (5) If you wish to be a cabin counselor, what experiences (4-H and non 4-H) do you have working with children of ages 8-13?
- (6) Briefly list the leadership responsibilities you have in 4-H and other organizations (i.e. church, school, community).
- (7) Why should you be selected as a camp counselor?
- (8) Adult Leader Recommendation:

LEADER SIGNATURE \_\_\_\_\_ PHONE NUMBER: \_\_\_\_\_

MEMBER SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

PARENT/GUARDIAN SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

**RETURN BY April 1st to:**  
**UW-Extension Office**  
**Attn: Jennifer Swensen**  
**569 N. Cedar Street, Adams 53910**  
**Or email to: 4-H@co.adams.wi.us**