



## **C.I.T Counselor in Training Application**

Middle School Camp July 15-20, 2013

Junior Camp July 22-27, 2013

### **Purposes of the C. I. T. program:**

1. To provide a service format through which the character of Christ may be developed in the lives of high school age young people.
2. To provide high school age believers an opportunity to serve their Lord by communicating God's love to younger students.
3. To train high school young people in the skills of sharing their faith and applying God's Word in meeting needs.
4. To prepare young people to serve as Counselors in the future as a part of PSCYA.

### **Eligibility:**

Participation in the C. I. T. program is by approval of the Dean and C. I. T. Director. Those who may apply must be High School Students and going into 10th grade at the youngest, and then only with special consideration. He/she must be a born-again believer in Jesus Christ and active in their church. They must be available for the entire week of camp they apply to serve at.

### **Cost:**

Each C.I.T will be charged \$120.00 to serve at camp. This cost is to cover the basic fees to house, feed and pay for insurance for the C.I.T. If the CIT attends High School Camp, they also pay the regular 2012 camp fee of \$215.00.

### **Responsibilities:**

Some of the responsibilities of a C. I. T. are:

1. Generally, to be an example of a believer in Jesus Christ in thoughts, words, actions and attitudes.
2. Attend staff meetings (general and C. I. T. meetings) on time and with proper materials.
3. Lead or co-lead a 3 to 5 minute testimony/talk during a cabin time session on a topic agreed upon with the C. I. T. Director.
4. One "lights out" cabin devotional talk.
5. Personal quiet time with God during morning cabin devotions.
6. Sit with your campers during Chapel, meals and activities.
7. Mingle with your campers during free time (You will be asked about your involvement with them.)
8. Assist with games and activities as appropriate.
9. Assigned tasks such as canteen duty, kitchen help, clean up etc.

You will receive, and may ask for, help in understanding and fulfilling these and any other responsibilities.

The earlier you get this application returned to the CIT Director, the better chance you have to be considered for a position! If you are accepted, we will contact you with more information.

God Bless!

Pastor Brian Patenaude

Puget Sound Christian Youth Association 2013



### **How do I become a CIT?**

1. Fill out this complete application, including questions and references. Send in starting March 1<sup>st</sup>.
2. Complete a medical reference form from the PSCYA camper application packet.
3. Return those materials to your pastor for his signature of approval.
4. Be ready to attend camp! Physically, mentally and above all---spiritually!
5. **Applications will be accepted starting April 1st. Any applications sent before April 1<sup>st</sup> will not be placed ahead of those received later.**

### **Please Mail Applications to the Following Addresses:**

**Middle School: Heath Lynn  
4115 224th St E, Spanaway, WA 98387**

**Junior Camp: Chuck Barnett  
26830 53rd Ave NE, Arlington, WA. 98223**

(If applying for both weeks, 2 separate forms will need to be mailed)

To complete your application please memorize the scripture below in the version you prefer. You must quote this passage from memory to your pastor who will advise the C. I. T. Director that you have done so. It would be advisable to get this done as soon as possible.

*Mark 10:43-45 Not so with you. Instead, whoever wants to become great among you must be your servant, and whoever wants to be first must be slave of all. For even the Son of Man did not come to be served, but to serve, and to give his life as a ransom for many." (NIV)*

**Do NOT turn in this sheet or the first page (information and responsibilities) with your application.**



### C.I.T. APPLICATION

Give this completed form to your pastor to sign and forward to the C. I. T. Director.

NAME \_\_\_\_\_ AGE \_\_\_\_\_ DATE \_\_\_\_\_

ADDRESS \_\_\_\_\_

TELEPHONE/CELL (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ City State Zip  
Do You Text?

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

HOME CHURCH \_\_\_\_\_ PASTOR \_\_\_\_\_

\_\_\_\_\_  
PARENTS NAME(S) EMERGENCY PHONE NUMBER(S)

### **CAMP CHOICE: Circle your preferred week to serve**

Middle School Camp July 15-20, 2013

OR

Junior Camp July 22-27, 2013

### **HEALTH INFORMATION & MEDICAL TREATMENT CONSENT**

Please fill out the Medical Form as provided by PSCYA for all campers. Pleased return this with your application.

\_\_\_\_\_ Has my approval to attend camp, is in good health and may participate in all its activities. I hereby give my consent for my child to receive medical/surgical treatment or first aid as required. I also understand I will be called in case of illness or injury.

\_\_\_\_\_  
DATE PARENT'S SIGNATURE



### **C. I. T. Application**

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If you need more room to answer, please use another piece of paper.

1. If you died today where would your soul go?                      How do you know?

On the back of this sheet or on another piece of paper, please write a 2-3 paragraph essay on how you became a Christian and what it means to follow Christ.

2. Why do you want to be a C. I. T.?

3. How would you describe a person committed to Jesus Christ?

4. What activities are you involved in at your church?

5. Are you satisfied that your daily experience of time with Christ reflects your faith in and love for Him at this time? (Explain, please)



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6. If you were a Junior or Junior High camper, what qualities would you hope your C. I. T. would show you during the week?

7. If your are accepted as a C. I. T., what qualities do you feel you have that would help you to do a good job?

8. What do you hope to "get out" of camp?

9. Have you ever been involved in physical or sexual abuse?



**C. I. T. Application**  
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REFERENCES: List three adults who know you (such as an employer, teacher or friend). Please do not list any family members or your Pastor from Church.

NAME \_\_\_\_\_ RELATIONSHIP \_\_\_\_\_

ADDRESS \_\_\_\_\_

city state zip

TELEPHONE \_\_\_\_\_

NAME \_\_\_\_\_ RELATIONSHIP \_\_\_\_\_

ADDRESS \_\_\_\_\_

city state zip

TELEPHONE \_\_\_\_\_

NAME \_\_\_\_\_ RELATIONSHIP \_\_\_\_\_

ADDRESS \_\_\_\_\_

city state zip

TELEPHONE \_\_\_\_\_

\* \* \* \* \*

I understand that Junior Camp will be a lot of fun but a lot of work as well. I promise to abide by the rules of the camp and follow the instructions of the Camp Dean, the C. I. T. Director and my counselor.

\_\_\_\_\_  
Your signature

\_\_\_\_\_  
(Signature of your pastor indicating his approval of your  
Participation in PSCYA C. I. T. program.)