

Completed applications will be processed on a first-come, first-served basis. Space in the program is limited, so we recommend submitting your application early.

Please review the following before applying to be a Camp Counselor:

1. Applicants are required to attend a summer camp staff training to receive camp policies/procedures and expectations this summer. This is a mandatory training for all potential Camp Counselors. **No exceptions.**
2. Camps are structured with the camper's happiness and, most importantly, their safety in mind. To ensure the camp's quality, we ask that only those who are genuinely interested in working with children and are able to fulfill the commitment as outlined apply to be a Counselor. Employment can be discontinued at any time if it is in the best interest of the program/counselor to do so.

Haygood Preschool Summer Camp Counselor Application

NAME _____

Last

First

M.I.

CELL PHONE _____ **EMAIL** _____

Available Weeks (Circle all that apply)

Week 1 *June 12 - 16*

Week 2 *June 19 - 23*

Week 3 *June 26 – 30*

Week 4 *July 17 - 21*

Week 5 *July 24 - 28*

Week 6 *July 31 – August 4*

EDUCATION

Elementary School Attended _____

Middle School Attended _____

High School Attended _____

Circle highest grade completed as of **May 2017**:

9th 10th 11th 12th Currently in College: _____

WORK/VOLUNTEER EXPERIENCE:

Date (From/To) _____ Job Title _____

Supervisor _____ Phone _____

Duties _____

Date (From/To) _____ Job Title _____

Supervisor _____ Phone _____

Duties _____

Haygood Preschool Camp Counselor Questionnaire

1. Please describe why you are interested in becoming a Camp Counselor this summer.
2. As a Camp Counselor at Haygood, list some goals you hope to accomplish.
3. List some experiences you have had that may have prepared you to be a Camp Counselor, i.e. babysitting, school clubs, extracurricular activities, etc.
4. As a camp employee, you will be required to participate in daily physical activities. Do you have any health problems that would prevent your participation? If yes, please explain.

A letter of recommendation from a teacher, coach, youth leader, pastor or other non-familial adult must be attached.

Applicant's Signature

Date

RETURN COMPLETED APPLICATION WITH LETTER OF RECOMMENDATION TO:

Haygood Preschool
Attention: Camp Director
1015 East Rock Springs RD NE Atlanta, GA 30306

OFFICE USE ONLY

Date received _____ Interviewed _____ Accepted _____ Declined _____