

Camp Foxfire - Counselor and CIT Application

Legal Name _____ Preferred Name _____

Phone # (_____) _____ - _____ Age _____ Gender _____

E-mail _____ @ _____ . _____

Residence: City _____ County _____

School Name _____ Graduation Year _____

Dates of training/camps fall between May 29 -July 31st. (See website.) Please indicate if there is any time during this period when you would not be able to attend camp. **If yes, when?**

Please send completed application and references to:

CampFoxfire@gmail.com

Please use subject line: Counselor Application: "Your Name"

Questions?

Contact Alison Hux, Camp Director at (770) 519-3185
and leave a voicemail with your contact information.

Section I: Interest

I am applying for the following position(s):

Teen Counselor In Training Adult Teacher/Group Leader

Please share why you are interesting in leading at Camp Foxfire this summer:

How did you hear about Camp Foxfire? _____

Camp Foxfire - Counselor and CIT Application

SECTION III: Abilities

During the summer, you will be expected to teach on a variety of topics. Please label the following activities with one of the choices below

Mark “Y” for “P” for “N” for:

“YES!! I can teach this”

“Possibly I could teach this – but I’d need some guidance”

“No, I don’t think I could teach this”

___ Animal sounds/calls	___ Animal Husbandry	___ Basic needs of animals
___ Building skills	___ Bee keeping	___ Bird watching
___ Bug/Butterfly ID	___ Beading	___ Camping
___ Crafts	___ Candle Making	___ Composting
___ Drawing/Sketching	___ Georgia natural history	___ Fire making
___ Flower pressing	___ Food web	___ Forestry/Tree ID
___ First Aid	___ Gardening	___ Georgia’s eco-regions
___ Hiking/backpacking	___ Herbal Remedies	___ Insect ID
___ Leave no Trace	___ Invertebrate Creek Study	___ Mammal Skull Study
___ Nature Arts & Crafts	___ Nature journaling	___ Native Georgia plants and trees
___ Nocturnal adaptations	___ Orienteering	___ Outdoor Cooking
___ Permaculture	___ Primitive skills	___ Recycling
___ Reuse art	___ Shelter building	___ Snake ID
___ Soil Testing	___ Storytelling	___ Terrariums
___ Tie-Dye	___ Tent pitching	___ Vermiculture/Worms
___ Wilderness survival	___ Wildlife tracking	___ Watercolor Painting
___ Other: _____	___ Other: _____	___ Other: _____

Do you play an instrument? _____ if so, what? _____

Would you be willing to play in front of kids at camp? _____

Note: Regardless of skill, ALL will learn and sing camp songs to lead at Camp Foxfire.

Camp Foxfire - Counselor and CIT Application

CONT. SECTION III: Abilities

Please choose 1-2 items from the list above that you placed a "Y" next to. Briefly, what makes you excited about teaching this to campers at Camp Foxfire?

Please choose 1-2 items from the list above that you placed a "N" next to. Briefly, what makes you nervous to teach this to campers at Camp Foxfire and what kind of support would you need to turn your "N" into a "P" or a "Y"

Are there any camp-related activities (that are not listed above) that you feel you could bring to our camp. Where or how did you develop this expertise?



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Camp Foxfire - Counselor and CIT Application

CONT. SECTION III: Abilities

Please choose ONE question to share your response to:

What unique contributions can you make to our summer camp program?

What is one nature topic you are passionate about, and how would you teach it to school aged children?

Why do you want to be a counselor specifically at an environmental and agricultural camp?



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Camp Foxfire - Counselor and CIT Application

SECTION IV: Background

References required: Please submit two or more references. **Family members do not count as references.** We are looking for professional or mentor relationship references, for example: teacher, professor, employer, supervisor, mentor, or coach.

Name: _____ Relationship: _____
Phone: _____ Email: _____

Name: _____ Relationship: _____
Phone: _____ Email: _____

Name: _____ Relationship: _____
Phone: _____ Email: _____

Have you ever been disciplined, written up, arrested or indicted for any form of child abuse, misconduct, or for any behavior that might be considered inappropriate for someone who will be working with children? _____

Have you ever been convicted or pleaded guilty to child abuse or any other felony? _____

Please List the last addresses where you have lived/stayed at during the last 5 years:

1. _____
2. _____

By signing below, I consent for Foxfire Woods & Farm to obtain references and agree to provide a criminal background check at my cost.

Attach a photocopy of your state issued photo ID (required for 16+).

By signing below, I attest all information given is true and accurate.

Signature _____ Date: _____

(CITs ONLY) Parent Signature _____ Date: _____