

# 2016 C.I.T. APPLICATION

A leadership opportunity for youth entering grades 8 through 12!

Return applications and letters of reference no later than **May 20, 2016 (NO EXCEPTIONS!)** to:  
Franklin Recreation, 505 DeMott Lane, Somerset, NJ 08873. For More Info: (732) 873.1991 option # 4

Include two (2) **SIGNED & SEALED** letters of recommendation.  
Letters **MUST BE** sealed and signed across the envelope flap.



Child's Name (Last) \_\_\_\_\_ (First) \_\_\_\_\_  Female  Male

Birth Date \_\_\_\_\_ Age \_\_\_\_\_ Grade Entering Fall 2016 \_\_\_\_\_

	MOTHER / GUARDIAN	FATHER / GUARDIAN
NAME (FIRST & LAST)		
ADDRESS (INC. STREET, CITY, STATE, AND ZIP)		
HOME PHONE		
WORK PHONE		
CELL/EMERGENCY PHONE		
E-MAIL ADDRESS		

**\*\*Students entering 8th grade may be CITs at SafetyTown or Play & Learn. Students entering grades 9-12 may be CITs at Swimming or the Camp/Playground sites. REPORT CARD REQUIRED. APPLICATIONS WILL NOT BE ACCEPTED WITHOUT DOCUMENTATION.**  
My child has permission to walk/bike home from the activity site: Check one:  YES  NO

1. Name/Relationship of person(s) other than parent(s) authorized to pick up child: \_\_\_\_\_

2. List relevant information about child's behavior, educational, or medical needs including allergies: \_\_\_\_\_

3. I will allow my child's picture to be used for display and publicity purposes  YES  NO

## C.I.T. APPLICATION

**APPLICATION DEADLINE: May 20, 2016 - NO EXCEPTIONS!** Please answer all questions and print neatly.  
Programs run Monday - Friday unless otherwise indicated. C.I.T.s must be present for 90% of the program.

**PLEASE NOTE: THERE ARE FEES ASSOCIATED WITH THE CIT PROGRAM. DO NOT SEND ANY PAYMENT UNTIL ACCEPTED INTO PROGRAM!**

Desired Site: Please indicate your site preference by ranking your choices 1 (1st choice) through 8 in the box provided.

- |  |   |
|--|---|
| <input type="checkbox"/> Inman Playground - \$50.00 [9:00 AM - 12:00 PM]                     | <input type="checkbox"/> Williams Park & Pool - \$75.00 [9:00 AM - 4:30 PM]         |
| <input type="checkbox"/> Franklin Middle School Full Day Camp - \$150.00 [9:00 AM - 4:30 PM] | <input type="checkbox"/> Franklin Park Full Day Camp - \$150.00 [9:00 AM - 4:30 PM] |
| <input type="checkbox"/> Pre-School Swimming @ Clarion Hotel - \$50.00 [Times Vary]          | <input type="checkbox"/> Level 1-6 Swimming @ Williams Park - \$50.00 [Times Vary]  |
| <input type="checkbox"/> Play & Learn @ MacAfee - \$50.00 [9:00 AM - 12:00 PM]               | <input type="checkbox"/> SafetyTown @ MacAfee - \$50.00 [9:00 AM - 12:00 PM]        |

PLEASE NOTE THAT SITES ARE ASSIGNED BASED ON AVAILABILITY AND NEED. YOU MAY NOT GET YOUR FIRST CHOICE.

Have you ever been a C.I.T. before?  YES  NO If so, where? \_\_\_\_\_

Describe your experiences working with children in the 5 - 12 age range.

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List your experiences in school, clubs, volunteering or special interests and any related leadership roles.

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

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Why should we select you as a C.I.T? \_\_\_\_\_

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What type of certifications do you hold and who is the issuing agency (i.e. CPR - American Red Cross)?

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Have you received any awards or honors? \_\_\_\_\_

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Tell me about an influential person in your life - describe the skills, talents, and behaviors you would like to model.

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Tell me something about yourself that you would like to improve and develop. \_\_\_\_\_

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Do you have any past experiences as a CIT, jobs, personal experiences, or volunteer opportunities that would make you an effective CIT?

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I hereby give Franklin Township Recreation personnel to obtain medical treatment for my child in the event of an emergency when I cannot be contacted. This permission authorizes medical personnel to perform necessary emergency treatment. I, also, certify that all the information that I have noted hereon is true.

\_\_\_\_\_  
C.I.T. Applicant Signature

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

# Personal Reference Form

References may not be submitted by a relative of the applicant.

The Franklin Township Recreation Department operates summer day camps for children entering preschool through grade 7. The camps are staffed by recreation professionals, teachers, college and high school students with strong backgrounds in working with children. In addition, limited CIT positions are available to youth entering grades 8 through 12. CIT's are expected to assist camp counselors in providing activities and supervision to our participants.

**DIRECTIONS:**

1) Please place recommendation in a sealed envelope and sign across flap.



2) Return to Franklin Recreation, 505 DeMott Lane, Somerset, NJ 08873 no later than 5/20/16 via applicant or mail. There are NO EXCEPTIONS to the due date.

Applicant's Name \_\_\_\_\_

Reference's Name \_\_\_\_\_

Reference's Relationship \_\_\_\_\_

**PLEASE ANSWER ALL QUESTIONS. PLEASE PRINT NEATLY.**

How long and in what capacity have you known the applicant?

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Would this applicant be a positive, suitable role model for children 5 - 12 years old?

Please explain \_\_\_\_\_

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Please feel free to make any additional statements concerning the applicants interest or readiness to participate in the CIT program.

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Do you have any reservations about children being in their care? Please explain.

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Are there any problems or concerns that might interfere with the applicants' ability to perform as a CIT?

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	Unable to Judge	Very Good	Good	Average	Poor
Energy & Initiative					
Creativity & Originality					
Reliability					
Patience					
Commitment to job or task					
Flexibility-adapts to changing situations					
Displays a positive attitude					
Ability to work with & relate to children					
Cooperative					

We greatly appreciate your time and effort. Selecting a positive role model for children is no easy task! Your assistance in our program will make a difficult selection process easier, enabling us to choose the best candidates. References received after the due date of 5/20/16 will not be considered. Thank you.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

May we contact you for further information?  YES  NO

Phone # \_\_\_\_\_

E-Mail Address \_\_\_\_\_

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