YMCA CAMP MOHAWK
2026 COUNSELOR IN TRAINING APPLICATION

Name: _____ **Date of Birth:** _____

Address: _____
Street City State Zip

Cell Phone: _____ **Personal Email Address:** _____

Mother/Guardian's Name: _____ **Phone Number:** _____

Father/Guardian's Name: _____ **Phone Number:** _____

Current School and Location: _____

Age as of June 28, 2026: _____ **Grade in School (Fall '25):** _____ **GPA:** _____ **out of:** _____

Year(s) attended Mohawk (if applicable): _____

List extracurricular activities (sports, clubs, jobs, hobbies, etc.):

List positions of leadership you hold or have held in school, church, temple or other group:

Why are you applying for the CIT Program?

What do you want to learn from this program?

Certifications: List expiration dates and type of certifications you hold (CPR for the Professional Rescuer, Standard American Red Cross First Aid, Basics of Baby-sitting, etc.)

Certification	Agency	Expiration Date

Camp Activity Skills Inventory:

CITs assist in teaching variety of activities. Put a "1" next to those activities in which you are accomplished; a "2" next to those activities in which you have some experience; a "3" next to those activities in which you may not have experience, but have interest in learning more about.

_____ American Sign Language	_____ Drama Method	_____ Riding
_____ Archery	_____ Drama Production	_____ Ropes
_____ Arts & Crafts	_____ Farm	_____ Rowing
_____ Badminton	_____ Field Hockey	_____ Sailing
_____ Baking	_____ Floor Exercise	_____ Set Design
_____ Basketball	_____ Friendship Bracelets	_____ Sewing
_____ Basketry	_____ Jewelry	_____ Soccer
_____ Canoeing	_____ Kayaking	_____ Stamping
_____ Ceramics	_____ Lacrosse	_____ Stable Management
_____ Cheerleading	_____ Nature	_____ Swimming
_____ Chorus	_____ Outdoor Living	_____ Tennis
_____ Creative Writing	_____ Paddleboarding	_____ Volleyball
_____ Dance	_____ Painting	_____ Windsurfing
_____ Disc Golf	_____ Photography	_____ Yoga

Please rate your swimming ability: ☐ Excellent ☐ Good ☐ Fair ☐ Non-swimmer

Please rate your horseback riding ability: ☐ Excellent ☐ Good ☐ Fair ☐ Non-rider

If you could teach any three activities at camp, what would they be, in order?

1. _____ **2.** _____ **3.** _____

List other camp related skills:

Other skills and knowledge which you can share with our campers:

References:

List the name, email address, and work or home phone number of three individuals who can provide testimony regarding your character. Coaches, teachers, people you have baby-sat for, your supervisors when you volunteered for a project, etc. are all good sources. Please do not list relatives or any Camp Mohawk staff. You must provide one reference form to each reference and request that they complete the form and return it to Camp Mohawk.

All three references must be received by December 10th, 2025. These can either be emailed to Mikayla or sent to the PO Box.

It is appropriate for you to provide them with a stamped envelope that you have addressed to Camp Mohawk. Mohawk staff completes verification of references at random.

1. **Name of Reference** _____ **Phone Number** _____

   Email Address _____
   Relationship _____

2. **Name of Reference** _____ **Phone Number** _____

   Email Address _____
   Relationship _____

3. **Name of Reference** _____ **Phone Number** _____

   Email Address _____
   Relationship _____

Video Interview:

A video answering the following questions should be sent to Mikayla's email by 11:59pm on December 10th, 2025. The video should not exceed 8 minutes.

1. Introduce yourself. Update on school, extra curriculars, etc.
2. Have you ever held a leadership position? If so, what was it?
3. Describe the most effective leader in your life. Who are they? Why? What qualities do they possess?
4. Describe a time you've had to work as part of a team and any difficulties that came up.
5. How would you handle not getting along with another CIT?
6. What are going to be the biggest challenges of the program and what are you looking forward to most?

Session:

Please check 2026 session desired:

- ☐ CIT 1 (June 28 – July 25)
- ☐ CIT 2 (July 26 – August 22)
- ☐ Either Session

The price for a CIT session is $3,150 for all four weeks.

I have read and understand the explanation of the Counselor-in-Training Program and would like to apply for a Counselor-in-Training position at YMCA Camp Mohawk. I agree to observe the rules of behavior for Counselor-in- Training and am willing to accept leadership responsibilities as assigned in consideration of the special rates granted to me. I understand that upon acceptance into the program a non-refundable $200 deposit is required. *(No deposit is required with this application.)* This application will not be accepted without a guardian signature.

I understand that acceptance into the CIT Program is dependent upon this application, 3 references and video interview process; I understand that it is a competitive process, and is not guaranteed to all that apply.

Applicant Signature	**Date**	**Parent/Guardian Signature**	**Date**

Please return the completed application, three references and video response by December 10, 2025.

Application, references, and video can be sent to mikayla@campmohawk.org or YMCA Camp Mohawk, P.O. Box 1209, Litchfield, CT 06759

Applicants should be sure that their references are submitted by the due date, as YMCA Camp Mohawk is not responsible for following up on incomplete applications.