COUNSELOR-IN-TRAINING



CIT I & II APPLICATION

Newport Parks & Recreation

222 Main Street • Newport, VT 05855
Tel. (802) 334-6345 • Fax (802) 334-5632
www.NewportRecreation.org



PLEASE PRINT CLEARLY • PLEASE PRINT CLEARLY • PLEASE PRINT CLEARLY • PLEASE PRINT CLEARLY • PLEASE PRINT CLEARLY

Name										
Name:										
Mailing Address:										
Phone:	□ Cell □ Home □ W	Work	Phone:				l □ Home □ Work			
Email Address (required):										
Shirt Size: ☐ SM ☐ MED ☐ LRG ☐ XLG ☐ XXLG Applying for: ☐ CIT I ☐ CIT II										
Attached: ☐ Resume ☐ Cover-letter ☐ Letter of Recommendation ☐ Other:										
Do you plan to work elsewhere or attend classes while working here?										
Do you need to request time off this summer? If so, please list dates:										
EDUCATIONAL BACKGROUND										
Name of School		om: M/YY)	To: (MM/YY)	Highest Gra		Major or Spec	ial Courses			
Grade School:										
High School:										
Other:										
Relevant certifications, trainings or special skills:										
WORK & VOLUNTEER EXPERIENCE										
Most Recent Company:										
Start Date:	End Date:		Wage:			☐ Volunteer				
Title:	Name of Supervisor:									
Duties:										
Reason for Leaving:										

Company:									
Start Date:		End Date:			Wage:	☐ Volunteer			
Title:		1		Name of Supervisor:					
Duties:									
Reason for Leaving:									
Componii									
Company:					<u> </u>				
Start Date:		End Date:		T	Wage:	☐ Volunteer			
Title:			Name of Supervisor:						
Duties:									
Reason for Leaving:									
If you've never had a paid job, do you have any other volunteer, coaching or babysitting experience that might give you relevant skills for this job?									
REFERENCES									
Name:			Relation						
Phone:	□ Cell □ Ho	ome □Work	Email:						
Name:			Relation	nship:					
Phone:	□ Cell □ Ho	ome □Work	Email:						
Name:			Relation	nship:					
Phone:	□ Cell □ Ho	ome □Work	Email:						