

**2016 4-H Summer Camp Dates:  
Sunday August 21<sup>st</sup> - Wednesday August 24<sup>th</sup>**

WAUKESHA COUNTY  
4-H CAMP STAFF APPLICATION

**Return by Monday, December 28, 2015, to UW-Extension office (\*parent signature)**

**Interviews will be conducted at 10 am on January 10 before the awards banquet alternative interview date is Jan. 13 at 6:30 to 8 pm in the Administration center G23. RSVP to Jann Pfaff by Dec. 28 to set up your interview [jann.pfaff@sbcglobal.net](mailto:jann.pfaff@sbcglobal.net)**

**Mandatory overnight training will be Feb. 12- 6 pm till Feb. 13-3pm at Camp Anokijig, Plymouth, WI**  
***(Late Applications will not be accepted)***

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ ZIP: \_\_\_\_\_ HOME PHONE: \_\_\_\_\_

CELL PHONE: \_\_\_\_\_ AGE (as of Jan 1): \_\_\_\_\_ CLUB \_\_\_\_\_

GRADE \_\_\_\_ EMAIL: \_\_\_\_\_ Circle T-SHIRT SIZE: S-M-L-XL-1X-2X-3X

**PLEASE RATE IN ORDER OF PREFERENCE POSITION(S) YOU ARE INTERESTED IN FOR SUMMER CAMP**  
(If there is a position you are not interested in, leave it blank) 1= 1<sup>st</sup> choice 2= 2<sup>nd</sup> choice 3= 3<sup>rd</sup> choice, etc.

\_\_\_\_ CIT BASE CAMP (Counselor in Training) (13 and older)

\_\_\_\_ COUNSELOR BASE CAMP (14 and older)

\_\_\_\_ PROGRAM STAFF BASE CAMP (14 and older, and prior position as counselor)

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\_\_\_\_ ADULT

\_\_\_\_ OTHER (SPECIFY): \_\_\_\_\_

**FOR ADULT STAFF USE ONLY:**

<b>CAMP STAFF POSITION (PROGRAM, COUNSELOR, CIT)</b>	
<b>ALTERNATE POSITION/ COMMENTS</b>	
<b>COUNSELOR OR CIT MATCH</b>	



(2) What experiences have you had as a leader in a camp situation? Describe years attended and your specific role. (Both 4-H and non-4H).

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(3) What projects, hobbies, or skills would you share with others at camp?

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(4) What other working experiences have you had with boys and girls both in 4-H and other organizations (i.e. church, scouting, and community)? Describe your role and responsibilities.

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(5) Every year camp has a theme. What theme ideas do you have for camp? How would you apply that theme to the various areas at camp?

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(6)What level of swimming instruction have you reached? Specify certification year.

**Beginner life- saving** \_\_\_\_\_ **Intermediate life- saving** \_\_\_\_\_ **WSI** \_\_\_\_\_

(6) Have you had training in:

**CPR** Yes \_\_\_\_\_ Year \_\_\_\_\_ No \_\_\_\_\_ **First Aid** Yes \_\_\_\_\_ Year \_\_\_\_\_ No \_\_\_\_\_

(7) Do you have any physical or health limitations we should accommodate for at camp? Please specify.

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## EMERGENCY CONTACT:

NAME \_\_\_\_\_ PHONE NUMBER \_\_\_\_\_

NAME \_\_\_\_\_ PHONE NUMBER \_\_\_\_\_

APPLICANT SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

PARENT/GUARDIAN SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

**RETURN BY MONDAY December 28, 2015 TO:**

Attn: Cindy Sarkady

Waukesha County UW-Extension

515 W Moreland Blvd Rm AC G22

Waukesha WI 53188

[Cindy.sarkady@ces.uwex.edu](mailto:Cindy.sarkady@ces.uwex.edu)

262 548-7784 - Fax 262 548-7787 - (Wis Relay) 711

**If you are chosen as Camp Staff,  
you are expected to attend ALL  
camp training meetings.**

**If you are unable to attend a  
meeting,  
please contact Jann Pfaff at  
cell: 262-751-3009 or text**