



# CHICO AREA RECREATION AND PARK DISTRICT

545 VALLOMBROSA AVENUE, CHICO, CA 95926  
PHONE (530) 895-4711 FAX (530) 895-4721

## COUNSELOR IN TRAINING APPLICATION

**\*Application must be filled out by applicant\***

(Please Print or Type)

### A. PERSONAL INFORMATION

Last Name: \_\_\_\_\_ First: \_\_\_\_\_ M: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: (Home) \_\_\_\_\_ (Cell) \_\_\_\_\_ Birth date: \_\_\_\_\_

Parent Name: \_\_\_\_\_ Daytime Phone #: \_\_\_\_\_

### B. EDUCATIONAL BACKGROUND

Age: \_\_\_\_\_ Grade in Fall 08: 6 7 8 9 10 11 12

School Attending in Fall 2008: \_\_\_\_\_

### C. Why are you interested in working as a CIT?

School Assignment: \_\_\_\_\_ To gain experience: \_\_\_\_\_ Volunteer Hours: \_\_\_\_\_

Other: \_\_\_\_\_

### D. Please list some of your strengths.

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### E. What is your experience working with children 4-12 years old?

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**F. Please list any dates that you will be unavailable during the summer.**

\_\_\_\_\_

**G. Additional Information**

**T-shirt size:** \_\_\_\_\_ (adult sizes: S, M, L, XL, XXL)

**H. PERSONAL REFERENCES: Please list 2 references other than family members**

<b>Name</b>	<b>Telephone #</b>	<b>Number of years known</b>
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1. \_\_\_\_\_

2. \_\_\_\_\_

**Have you ever been convicted of a criminal offense (felony or serious misdemeanor)?** \_\_\_\_\_  
(Convictions for marijuana-related offenses that are more than two years old need not be listed.)  
If yes, state nature of the crime(s), when and where convicted, and disposition of the case.

\_\_\_\_\_

(Note: No applicant will be denied admission to the CIT educational program solely on the grounds of conviction of a criminal offense. The nature of the offense, the date of the offense, the surrounding circumstances and the relevance of the offense to the position(s) applied for may, however, be considered.)

**CERTIFICATION OF APPLICANT: By signing below, you acknowledge the following:**

- By participating in the CIT program, you are a volunteer and not an employee of CARD.
- By participating in the CIT program, you are not entitled to a job with CARD at the conclusion of the training period.
- By participating in the CIT program, you are not entitled to wages or any employee benefits for the time spent in training.

\_\_\_\_\_  
**Signature of Applicant**

**Date:** \_\_\_\_\_

\_\_\_\_\_  
**If under 18, signature of parent or legal guardian must also be provided**

**Date:** \_\_\_\_\_