

### 4-H CAMP COUNSELOR APPLICATION

Applications Are Due At Your County Extension Office by **February 1, 2020**

#### TO COMPLETE APPLICATION PROCESS:

1. Read the requirements and behavioral expectations.
2. Note training and camp dates - check your schedule.
3. Fill out attached forms. Incomplete applications may not be considered.
4. Send application to your Extension Office in time to be received by February 1, 2020.

#### COUNSELOR REQUIREMENTS:

1. You must be in Grade 9—12 on January 1<sup>st</sup> to be considered for Camp Counselor. (If we do not receive enough high school counselor applications, 8<sup>th</sup> graders may be considered for Counselors in Training.)
2. **Must** attend the following Camp Counselor Trainings:

Tuesday, March 17	5:30-8PM	Whitley County Fairgrounds	Get to Know You
Monday, April 27	5:30-8PM	Allen County Extension Office	Camp Planning
Thursday, May 14	5:30-8PM	Allen County Extension Office	Camp Planning

#### Please Note:

Meals will be provided at all above trainings.

3. Campers/Counselors report to 4-H Camp as follows:

Camp Counselors Arrival	Tuesday, June 2, 2020 by 1PM
4-H Camp Runs	Wednesday, June 3 thru Friday, June 5

Counselors are expected to help check-out their campers and will not be permitted to leave until all campers have been picked up and we have been dismissed from duties at camp.
4. Camp Fees are \$175 for Counselors and are sponsored by your County 4-H Program.
5. A limited number of Counselors will be selected from the Northeastern Indiana counties participating in 4-H Camp. You will be notified in early March 2020 as to whether or not you have been selected as a 2020 4-H Camp Counselor.

**NAME:** \_\_\_\_\_ **GRADE:** \_\_\_\_\_ **YEARS IN 4-H:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_ **CITY/STATE/ZIP:** \_\_\_\_\_

**EMAIL:** \_\_\_\_\_ **COUNTY:** \_\_\_\_\_

**CELL PHONE:** \_\_\_\_\_ **BIRTHDAY (mm/dd/yy):** \_\_\_\_\_ **T-Shirt Size:** \_\_\_\_\_

**Have you been a 4-H Camp Counselor before?** NO:  YES:  If yes, # of years: \_\_\_\_\_

What years? \_\_\_\_\_

**Signature of Parent/Guardian:** \_\_\_\_\_ **Date:** \_\_\_\_\_

## REFERENCES

Please list the names, addresses, and phone numbers of two people (not related to you) who can provide information about how you work with adults, peers and younger children; follow through on responsibilities; and conduct yourself in general. Examples – Teachers/Club Leaders/Employers etc.

1. \_\_\_\_\_

<b>Name</b>	<b>Phone Number</b>			
<b>Address</b>		<b>City</b>	<b>State</b>	<b>Zip</b>
<b>Email</b>	<b>How do you know them?</b>			

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

<b>Name</b>	<b>Phone Number</b>			
<b>Address</b>		<b>City</b>	<b>State</b>	<b>Zip</b>
<b>Email</b>	<b>How do you know them?</b>			

### 1. Leadership Roles:

List experiences you have had in the last 3 years that you feel show your leadership training or abilities. They can be related to school, family, community, 4-H, or other clubs.

#### A. What activities are you involved in at school?

\_\_\_\_\_  
\_\_\_\_\_

#### B. What activities are you involved in within your community?

\_\_\_\_\_  
\_\_\_\_\_

#### C. What are your hobbies or interests outside of school?

\_\_\_\_\_  
\_\_\_\_\_

### 2. Have you held any kind of job - paid or unpaid? If so, give details.

\_\_\_\_\_  
\_\_\_\_\_

### 3. What are your favorite 4-H projects? (list 3 maximum)

\_\_\_\_\_

4. Do you have any experience working with younger children? If so, please explain:

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5. **CAMP ACTIVITIES**

The counselors help to select, plan and teach the camp classes and activities. Please indicate your abilities or interests in the list of activities below by placing a 1 or 2 beside each according to the following scale:

**#1** = You Can Organize/Teach this Topic      **#2** = You can Help with/Wiling to Learn this Topic

- |             |                  |                |
|-------------|------------------|----------------|
| ___ Crafts  | ___ Food Science | ___ Recreation |
| ___ Fishing | ___ Geocaching   | ___ STEM       |

**Sports**

**Other Activities**

- |                |                |           |           |             |
|----------------|----------------|-----------|-----------|-------------|
| ___ Basketball | ___ Soccer     | ___ Flags | ___ Songs | ___ Vespers |
| ___ Frisbee    | ___ Volleyball |           |           |             |
| ___ Kickball   |                |           |           |             |

6. Please list other activities not listed that you could do that could be appropriate for Camp, be creative as we are looking for new ideas:

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7. Do you hold a current Basic First Aid, CPR, Life-Saving, or Water Safety Certificate? If so, indicate which and give dates:

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8. **IMPORTANT:** In the space below and/or on back, write a brief biographical sketch. Include specialized training in camping, camping/outdoor skills, and experience or training in other activities which might have a bearing on your application.

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# Youth Behavioral Expectations

## To Promote the Well-Being of Youth for 4-H Teen Leaders Who Work with 4-H Youth Development Programs in Indiana

*“Those who believe in and work with youth have confidence in our future.”*

These Youth Behavioral Expectations give 4-H teen leaders the opportunity to reaffirm their commitment and dedication to the well-being of 4-H members. When all individuals sign a copy of this document, they are making a collective statement that youth in the 4-H Youth Development Program are being treated with respect, dignity, and attention to individual needs.

In my role as a teen leader I will:

- Respect, adhere to, and enforce the rules, policies, and guidelines established by the Purdue University Cooperative Extension Service including all laws related to child abuse and substance abuse.
- Conduct myself in a courteous, respectful manner, exhibit good sportsmanship, and demonstrate reasonable conflict management skills.
- Be truthful and forthright when representing the 4-H Youth Development Program.
- Under no circumstances possess, consume, or be under the influence of alcohol, tobacco or tobacco-like products, electronic smoking devices (including, but not limited to, e-cigs, vapes, juuls), illegal drugs, or other dangerous substances at 4-H Youth Development Program events or activities.
- Recognize that verbal or physical abuse, failure to comply with equal opportunity and antidiscrimination laws, or committing criminal acts are not acceptable practices in 4-H Youth Development Programs.
- Accept my responsibility to represent 4-H Youth Development Programs with dignity and pride by being a positive role model for other youth.
- Avoid inappropriate interactions with and displays of affection toward other persons.
- Wear clothing that is appropriate for the event or activity.
- Accept supervision and support from salaried Extension staff or designated management volunteers.
- Will participate in orientation and training, which includes youth protection standards, sponsored by the Purdue Cooperative Extension Service.
- Operate machinery, vehicles, and other equipment in a safe and responsible manner when working with other youth participating in 4-H Youth Development Programs.
- Treat animals in a humane manner and teach program participants appropriate animal care and management.
- Use technology in an appropriate manner that reflects the best practices in youth development.
- Accept my responsibility to promote and support the 4-H Youth Development Program in order to develop an effective county, state, and national program.



I have been given the opportunity to review these expectations and the opportunity to ask questions, and those questions have been answered to my satisfaction. By signing below, I acknowledge that I have read and agree to abide by the behavioral expectations in this document. I understand that my failure to comply with these expectations may result in disciplinary action or termination of my youth leadership position in the Indiana 4-H Youth Development Program.

\_\_\_\_\_  
Printed 4-H Member Name

\_\_\_\_\_  
Date

\_\_\_\_\_  
4-H Member Signature (required if 18 years of age or over) Date

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

\_\_\_\_\_  
Date

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

\_\_\_\_\_  
Date

\_\_\_\_\_  
Educator Signature

\_\_\_\_\_  
Date

A signed copy of the Youth Behavioral Expectations will be on file in the respective administrative office.

These Behavioral Expectations and related policies have been developed by faculty, educators, staff, and volunteers to strengthen the work of those who believe in the 4-H Youth Development Program.