



“Creating Community Through People, Parks and Programs”

127 Norwich Avenue, Colchester, CT 06415

(860) 537-7297 | Fax: (888) 468-9093 | [apizzutiello@colchesterct.gov](mailto:apizzutiello@colchesterct.gov) | [www.colchesterct.gov](http://www.colchesterct.gov)

February 3, 2012

Dear CIT Applicant,

Thank you for your interest in Colchester Parks & Recreation’s Counselor in Training program! Our 2- year CIT program provides our CIT trainers the opportunity to teach the skills and methods to be a successful young leader through practical experiences. The goal of the program is to prepare teens for future employment. Although the training program is specifically designed to train our future “super staff” the skills CIT’s develop will greatly benefit them in any future endeavors. This year our CIT programs are 4 weeks and the fee is \$125 for the program. The first year program concentrates on the following areas:

- Why we are here
- Being a positive role model
- Creating meaningful connections
- Planning & implementation of various activities
- Developing leadership skills
- Learning & demonstrating appropriate & professional conduct
- Building self confidence
- Being responsible
- Team building

The second year CIT program takes the year one goals to a higher level. We also incorporate the following:

- Personal goal setting
- Taking the initiative
- Mentoring

At this time we are planning a very special CIT project in which all CIT’s will have the opportunity to utilize their skills and discover new ones! With guidance from our CIT trainers they will take the lead in all aspects of this assignment.

We look forward to receiving your CIT application packet which should include your application, a teacher reference and a personal reference. All applications are available on our website under “forms” and in the WJMS Guidance office. The application deadline is March 30, 2012. CIT’s who have successfully completed the first year CIT program were notified at the end of their session as to their status.

Anita Pizzutiello      Recreation Supervisor



## Hello Fabulous CIT Applicants!!!

Thank you so much for submitting your CIT application! Summer will be here before you know it and Colchester Parks & Recreation Day Camp is READY for a fantastic new season with lots of great additions including new entertainers and TRIPS!

We are very excited with the number of fantastic applications we received. Unfortunately, we cannot accommodate everyone. We are conducting CIT selection process activities on **Monday, April 23<sup>rd</sup>**, on the side lawn of the Town Hall; rain location Town Hall meeting rooms 1, 2 & 3. All applicants are required to attend. Activities will begin promptly at **3:00 p.m.** and will conclude by 5:00 p.m. Please dress appropriately as you will be participating in recreational activities. These activities are designed to give you the perfect opportunity to shine and demonstrate your unique individuality and all the great qualities you will bring to our camp! In addition, be prepared to expand on questions similar to the ones on your application.

Please reply via email at [apizzutiello@colchesterct.gov](mailto:apizzutiello@colchesterct.gov) to confirm that you will be there!

## Can't wait to meet all of you!

Miss T, & Mr. Kyle, & Miss Anita



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## Counselor in Training Application

Applicant's Name: \_\_\_\_\_  
Parent's Name(s): \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone Number: \_\_\_\_\_ Grade in Fall: \_\_\_\_\_  
Email Address: \_\_\_\_\_

Preferred Session (selection not guaranteed): **4 weeks**  
June 25<sup>th</sup> - July 20<sup>th</sup> \_\_\_\_\_ July 23<sup>rd</sup> - August 17<sup>th</sup> \_\_\_\_\_ No Preference \_\_\_\_\_

Please answer the following questions completely and carefully.

List the characteristics you feel an exceptional Counselor in Training should have.

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1. Why would you like to be in the CIT program?

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2. What experiences have you had that would help you to be an exceptional CIT?

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3. Is there anything else you would like us to know about you? Special talents?

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### Counselor In Training Personal Reference Form

To be completed by an adult (**not a relative**) who has known the applicant for one year or more.

Applicant's Name: \_\_\_\_\_

How long have you know the applicant? In what capacity?

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

Do you think the applicant would be a good caregiver for children? Why?

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

Do you find the applicant to be:

Dependable? \_\_\_\_\_  
Trustworthy? \_\_\_\_\_  
Honest? \_\_\_\_\_

Do you think the applicant would be a positive role model for children? \_\_\_\_\_

Do you feel the applicant uses mature judgment? \_\_\_\_\_

Is there anything else you would like us to know about the applicant?

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

Name: \_\_\_\_\_ Date: \_\_\_\_\_ Phone: \_\_\_\_\_

Signature: \_\_\_\_\_



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## Counselor In Training Teacher Reference Form

To be completed by a current or past teacher.

Applicants name \_\_\_\_\_

1. What class(es) do (did) you have the applicant in?

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2. Do you think that the applicant would be a good caregiver and role model for children in a recreational setting? Why?

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3. Does the applicant have good conduct at school?

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4. Does the applicant turn in assignments on time?

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5. Is the applicant courteous and respectful to others?

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6. Overall impression?

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\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Phone

\_\_\_\_\_  
Name (please print)