



BOYS & GIRLS CLUBS
OF THE COLORADO RIVER

Counselor in Training Application

NAME LAST	FIRST	MI	SEX	AGE	CLUB #
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BIRTHDATE	HOME PHONE				
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PRESENT ADDRESS				CITY	STATE ZIP
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How were you referred to the Boys & Girls Clubs of the Colorado River (BGCCR)?

Relatives employed by BGCCR? (If any, give dates, position)

Have you ever been convicted of a criminal offense? (If yes, please explain)

Yes No

EDUCATION

SCHOOL	NAME AND LOCATION	ACTIVITIES	GRADUATE
			Y N
			Y N

WORK EXPERIENCE

COMPANY NAME: _____ YOUR TITLE: _____

COMPANY ADDRESS: _____ CITY/STATE/ZIP: _____

DATE STARTED: _____ ENDED: _____ SALARY STARTING: _____ EDNDING: _____

SUPERVISOR'S NAME SUPERVISOR'S TITLE TELEPHONE

MAY WE CONTACT EMPLOYER
 YES NO

BRIEF DESCRIPTION OF DUTIES & RESPONSIBILITIES

REASON FOR LEAVING

CLERICAL EXPERIENCE

TYPE	WPM	WORD PROCESSING	TYPE	DICTATION	WPM
Y N		Y N		Y N	

Indicate any foreign languages you can speak, read, and/or write.

	FLUENT	GOOD	FAIR
SPEAK			
READ			
WRITE			

Describe any extra curricular activities, special job-related skills and qualifications acquired from employment experience.

SPECIALIZED SKILLS
(Check skills/equipment operated)

- | | | |
|--|---|---------------|
| <input type="checkbox"/> 10-key | <input type="checkbox"/> Fax | Other (list): |
| <input type="checkbox"/> Typewriter | <input type="checkbox"/> WordPerfect | _____ |
| <input type="checkbox"/> Windows 98 | <input type="checkbox"/> Microsoft Office | _____ |
| <input type="checkbox"/> Multi-line Phone Sys. | <input type="checkbox"/> QuickBooks | _____ |

I authorize Boys & Girls Clubs of the Colorado River (BGCCR) to investigate all statements in this application and to secure any necessary information from all my employers, references, and academic institutions. I hereby release all of those employers, references, academic institutions, and BGCCR from any liability arising from their giving or receiving information about my employment history, academic credentials or qualifications, and my suitability for participation with the BGCCR CIT Program. I understand that any offer of recruitment is contingent upon receipt of a satisfactory report concerning my academic credentials and employment references.

I further understand that any false or misleading statements will be sufficient cause for rejection of my application if BGCCR has not recruited me or immediate dismissal if BGCCR has recruited me. I also authorize BGCCR to supply information about my employment record, in whole or part, in confidence to any prospective employer, government agency, or other party having legal and proper interest, and I hereby release BGCCR from any and all liability for its providing this information.

I understand that nothing in this CIT application, in BGCCR's policy statements or personnel guidelines, or in my communications with any BGCCR official is intended to create a recruitment contract between BGCCR and me. I also understand that BGCCR has the right to modify its policies without giving me any notice of changes. No promises regarding recruitment have been made to me. I understand that if a volunteer relationship is established, I have the right to terminate my recruitment at any time for any reason.

I hereby acknowledge that I have read and understand the preceding statements.

Signature

Date

All Counselors in Training will adhere to the code of conduct in the Club handbook. Any actions that result in certain consequences may lead to the termination of the member's participation in the CIT Program.

The hours that a CIT will work are from 8:45 am to 4:30 pm every day. Please note that all CITs need to be on time.

If a participating member can not show up for a particular day, that member must notify the Teen Director and/or Career Director.