JUNIOR COUNSELOR APPLICATION 2012

PLEASE PRINT NEATLY **FILL OUT ALL INFORMATION**

NAME _____
First Last

COLLEGE YOU ATTEND_____YEAR*_____

YOUR MAILING ADDRESS _____

CITY, STATE , ZIP _____ CELL PHONE:_____

HIGH SCHOOL YOU ATTENDED _____ YR OF GRAD _____

Week(s) You Are Interested in Working:
____ Week 1-July 1- 7 ____Week 2-July 8-14 ____ Week 3-July 15-21

MOST RECENT 5K TIME: _____ ARE YOU ON YOUR COLLEGE TEAM?_____

ACCOMPLISHMENTS 2011-2012_____

ARE YOU IN SHAPE TO RUN AND FREE FROM INJURIES? _____

Do You Have Running Camp Experience As A Camper or Counselor? _____

Explain Why You Are Applying For This Position: _____

_____

Why Do You Think You Are A Good Candidate For This Position? _____

_____

YOUR HOME MAILING ADRESS:_____

CITY, STATE ZIP _____

HOME PHONE NO. _____ CELL PHONE NO. _____

E-MAIL ADDRESS _____ SHOE SIZE _____

This application must be accompanied by a Recommendation from your Coach and a Copy of you Medical Insurance Card.

*YOU MUST HAVE COMPLETED YOUR FRESHMAN YEAR IN COLLEGE TO APPLY. All Staff Members Are Subject to A Background Check.