



**Manchester-by-the-Sea**  
 Parks & Recreation Department  
 10 Central Street, Manchester, MA 01944  
 Phone: 978-526-2019      Fax: 978-526-2001  
 www.manchester.ma.us

## Counselor-In-Training Application

|                |        |      |                 |
|----------------|--------|------|-----------------|
| Name:          | First  | Last |                 |
| Address:       | Street | City | State      Zip  |
| Email Address: |        |      | Home Telephone: |
|                |        |      | Cell Phone:     |

Date of Birth: \_\_\_\_\_ Grade Entering in September: \_\_\_\_\_

\*\*The Town of Manchester requires that all Counselor-In-Training Candidates must have completed 8<sup>th</sup> grade prior to the start of the Summer Playground Program. Applicants that do not meet this minimum grade requirement will not be considered. The CIT Program will last for one summer only. After successfully completing one summer of the CIT Program, CITs are permitted to apply for the Summer Playground Internship Program. Playground Interns will have increased responsibilities and will include further mentorship in preparation for a possible future Playground Counselor Position.

If your application is considered favorably, on what dates would you be available to work? \_\_\_\_\_

Are you available for the entire summer? (Late June – Mid August): \_\_\_\_\_

Please list any days you will need off throughout the summer: \_\_\_\_\_

### EMPLOYMENT/VOLUNTEER EXPERIENCE

(Please begin with most recent experience.)

|                          |   |                    |
|--------------------------|---|--------------------|
| 1. Company/Employer Name | Dates Employed<br>From: _____ To: _____ | Position           |
| Address/Phone            | Supervisor                              | Reason for leaving |
| 2. Company/Employer Name | Dates Employed<br>From: _____ To: _____ | Position           |
| Address/Phone            | Supervisor                              | Reason for leaving |

### EDUCATION

|                            |                                      |
|----------------------------|--------------------------------------|
| Name and Address of School | Grade Completed<br>(as of 6/30/2018) |
|                            |                                      |

**REFERENCES:**

Please provide the names of three (3) people (not related to you) who can attest to your ability to perform the duties/position for which you are seeking employment.

| Name | Address | Phone # | How They Know You |
|------|---------|---------|-------------------|
|      |         |         |                   |
|      |         |         |                   |
|      |         |         |                   |

Using the space provided, briefly explain why you are applying for a CIT position with the Manchester Parks & Recreation Department. Please include any experience and/or personal assets you have that make you a desirable candidate.

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Please check if you hold any of the following certifications:

CPR: \_\_\_\_\_ First Aid: \_\_\_\_\_ Babysitting: \_\_\_\_\_

Would you be interested in getting certified in CPR, First Aid and/or Babysitting?

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What is the best time to call you? \_\_\_\_\_

**PLEASE READ & SIGN BELOW**

The information provided in m application in true and complete. I understand that, if employed, any false statements on this application may result in my dismissal. I also understand that that it is a privilege to be a CIT and if I do not receive a favorable evaluation, I may be asked to leave the program.

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

All applications should be submitted to:

Manchester Parks & Recreation  
10 Central Street  
Manchester, MA 01944