



Central Pacific Conference, United Church of Christ, Outdoor Ministries Program

COUNSELOR-IN-TRAINING AND JUNIOR COUNSELOR APPLICATION

Please circle one of the above for which you are applying.

NAME _____

PHONE _____

EMAIL _____

ADDRESS _____

BIRTHDATE _____

Are you affiliated with a UCC church? If so, which one(s)?

Are you acquainted with Camp Adams? If so, how?

Have you been a counselor in training? If so, please provide the date and the name of the director of that session.

Please list any school or extra-curricular activities which you think would help you as a counselor?

Please list any previous work experience which you feel will be helpful to you as a camp counselor?

What age group do you especially like to work with and why?

Why do you want to be a camp counselor?

Personal References (Persons who have known you for some time- teacher, minister, employer)

Name _____ Email _____

Name _____ Email _____

Applicant's Signature _____

Date _____

**Please scan or mail to CIT Junior Counselor at campadamsed@cpcucc.org or 18499 S. Hwy
211, Molalla, OR 97038**