FOR YOUTH DEVELOPMENT®
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

CIT Application

DATE SUBMITTED:_____

HOCKOMOCK AREA YMCA Counselor in Training Program

You must interview and receive a CIT offer prior to registering to attend Camp as a CIT.

Which branch do you wish to attend? ___FOXBORO ___FRANKLIN ___NORTH ATTLEBORO

Participant Info:
Name: _____ Date of Birth:_____ Grade Entering: _____

Address: _____ City:_____ State: _____ Zip: _____

Phone: _____ - _____ - _____ email: _____ Grade Entering: _____

Parent/Guardian Info:

Name:_____ Day Phone:_____-_____-_____ Email:_____

Name:_____ Day Phone:_____-_____-_____ Email:_____

Emergency Contact: _____ Relationship: _____ Phone: _____-_____-_____

List three adult references. Please include one relative and two non-related adults:

Name:_____ Connection:_____ Phone:_____-_____-_____

Name:_____ Connection:_____ Phone:_____-_____-_____

Name:_____ Connection:_____ Phone:_____-_____-_____

1) Why do you want to be part of the CIT program?

2) Please rank the items below from 1-5 with 1= not interested to 5= very interested
What additional skills do you have that might contribute to the camp environment?

____ Archery ____ Arts & Crafts ____ Cooking ____ Dancing ____ Math/Science

____ Music ____ Singing ____ Sports ____ STEM ____ Swimming

3) What hobbies do you have? What extracurricular activities or clubs are you a part of?

4) What does a role model mean to you? Who is a role model in your life and why?

5) List 4 characteristics that would make you a great CIT.

_____ _____

_____ _____

6) What are some challenges might you face as a CIT?

7) Did you attend camp when you were younger? If so, what was your favorite camp memory?

8) On a separate piece of paper, describe leadership. What does leadership mean? What does it look like to you? Who are some leaders you look up to?

IMPORTANT:

1. Additional paperwork will be required from all candidates accepted into the program.

2. CIT is a 6-week commitment for youth entering grades 9 & 10. CITs are expected to be on time to camp, ready to participate and willing to learn. Please select the weeks you are available to attend:

__ **Week 3** 6/29/26 – 7/3/26	__ **Week 6** 7/20/26 – 7/24/26	__ **Week 9** 8/10/26 – 8/14/26
__ **Week 4** 7/6/26 – 7/10/26	__ **Week 7** 7/27/26 – 7/31/26	__ **Week 10** 8/17/26 – 8/21/26
__ **Week 5** 7/13/26 – 7/17/26	__ **Week 8** 8/3/26 – 8/7/26	__ **Week 11** 8/24/26 – 8/28/26

3. After review of your completed application, you will be contacted for an interview. If selected, you and a parent/guardian will be invited to attend a mandatory information session.

4. While it is the intent of the program to build participant success, future Cadet opportunities are based on performance. Each CIT will receive regular evaluations and be informed of his/her status for progression at the end of the session.

5. The YMCA reserves the right to dismiss any CIT whose behavior poses a risk to themselves or others. Consumption of alcoholic beverages, drugs or smoking/chewing tobacco is prohibited and grounds for dismissal from the program.

6. As a CIT, you are expected to act responsibly and look out for your group. As a role model, you must respect other LIT's, campers, camp staff & Y members while performing to the best of your abilities.

The information I have provided in this application is true, complete and accurate.

Applicant Signature:_____ Date:_____

Parent/Guardian Signature:_____ Date:_____

Optional: If you are 14 or older, your parent/guardian may give permission for you to self–sign in & out. If the area below is not signed, your parent/guardian will be required to sign you in and out for each day of camp.

Applicant Signature:_____ Date:_____

Parent/Guardian Signature:_____ Date:_____

Please mail or electronically submit your application to the YMCA no later than 5/1/26. Interviews are being scheduled now. See email & mailing addresses below and select the town of your choice for summer 2026.

Questions may be directed to:

North Attleboro YMCA:
300 Elmwood Street
Attn: Josh Porter
North Attleboro, MA 02760
joshuap@hockymca.org
508.695.7001

Foxboro YMCA:
67 Mechanic Street
Attn: Ross Gemba
Foxboro, MA 02035
fxcamp@hockymca.org
508.543.2523

Franklin YMCA:
45 Forge Hill Road
Attn: Julia Buckingham
Franklin, MA 02038
juliab@hockymca.org
508.528.8708