

PLEASE ATTACH RECENT PHOTO

## 2024 SB2W CIT Application

OFFICE USE ONLY: AI:

Name		Email	Email			
City		State				
Present Age	Present Grade	Birthday _		I Male □ Female		
Parents Names Dr.,	Rev., Mr. and/or Mrs.			_		
Are you living with	both parents? YES NO	If not, with whom?		_		
Insurance Carrier		Policy # _		_		
List any physical or	psychological concerns:			_		
Do you have any sp	ecial dietary requirements	s?		_		
What church do you Please check which	attend? terms you are available tl	his summer. If you have pro	eferences, please indica	te them.		
CHECK	Summer One	June 13 – June 21	Third Term	$July\ 21-Aug\ 2$		
TIMES	First Term	June 23 – July 5	Fourth Term	Aug 4 – Aug 16		
-	a camper?		NO.			
What term were you If there is not a posi Circle if you have a		o work on crew? YES  you serve at: SB2W La	NO ke Gloria SB2W Q	ue NO PREFERENCE		
What term were you If there is not a posi Circle if you have a Have you ever serve	tion open, do you want to preference which camp y	o work on crew? YES  you serve at: SB2W La	ke Gloria SB2W Q			
What term were you If there is not a posi Circle if you have a Have you ever serve What sports did you	tion open, do you want to preference which camp yed on crew? YES NO play in High School?	o work on crew? YES  you serve at: SB2W La	ke Gloria SB2W Q			
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CO:

CI:

What would you consider to be some	e of your strengths and w	reaknesses?	
What is a verse from scripture that ha	as personal meaning to y	ou? Why does it have meaning	ng?
Write a brief biographical essay which notable stages in your spiritual growt			
COUNSELING SITUATIONS AND In your mind, what are important qua			
What are your personal convictions a			
Alcohol:			
Homosexuality:			
The Church:			
Sex:			
Abortion: Drug Use:			
INTENT			
Why would you like to work as a Cl	T at Summer's Best Two	Weeks?	
Please list below a person (not family	y) who we can contact as	s a character reference:	
Name:	Phone:	Relation:	
THANK YOU	U SO MUCH FOR	CAREFULLY FILLING	THIS OUT!

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PLEASE REMEMBER TO RETURN APPLICATION BY MARCH 1