

Name:

Phone #-

WHEN ARE YOU AVAILABLE FOR AN INTERVIEW?

BRIEFLY TELL US IN THE SPACE BELOW WHY YOU WOULD LIKE TO BE A CANDIDATE FOR A CIT POSITON:

SKILL ASSESSMENT: Please evaluate yourself in the following activities using the ranking system below. Please be as honest as you can, this tool is used simply for evaluation and will not directly affect your chance at being accepted into the program.

1= Excellent Knowledge 2= Strong Knowledge 3=Average Knowledge 4= Poor Knowledge

ART SKILLS

Dance/Song ____

Crafts_____

Drama/Play_____

SPORTS SKILLS

Basketball____

Baseball_____

PEOPLE SKILLS

Communication_____

Problem Solving_____

Volleyball_____

Conflict Resolution_____

Soccer_____

Group Management_____

Group Games_____

Please check the weeks you can commit to:

(Note: There is a 2 week commitment) If you cannot do 2 weeks in a row you can split up.

_____ June 28th & July 9th

_____ July 12th & July 23rd

_____ July 26th- August 6th

T Shirt Size: _____

Phone Number: _____

SIGNATURE OF PARENT OR GUARDIAN: _____ DATE: _____

EMAIL OF PARENT OR GUARDIAN: _____

I understand that consistent attendance is critical to completion of this program.

SIGNED: _____ DATE: _____

(C.I.T Applicant)