Completed applications will be processed on a first-come, first-served basis. Space in the program is limited, so we recommend submitting your application early.

Please review the following *before* applying to become a Haygood Camp Counselor:

- 1. Applicants are required to attend a summer camp staff training session to receive camp policies/procedures and expectations. This is a mandatory training for all potential camp counselors. No exceptions. Meeting time TBD.
- 2. Camps are structured with the camper's happiness and, most importantly, their safety in mind. To ensure the camp's quality, we ask that only those who are genuinely interested in working with children and can fulfill the commitment as outlined apply to be a counselor. Employment can be discontinued at any time if it is in the best interest of the program/counselor to do so.

Haygood Preschool Summer Camp Counselor Application

NAME			
Last	First		M.I.
PHONEEMAIL			
AVAILABILITY Circle all that apply	. Must be able to work all five days o	f the week.	
Week 1 (June 12-16)	Week 2 (June 20-23)	Week 3 (June 26-30)	
Week 4 (July 17-21)	Week 5 (July 24-28)		
EDUCATION			
Elementary School Attended			
Middle School Attended			
Highest grade completed as of Ma			
	urrent college student: yes /	no Location	
	, ,		
WORK/VOLUNTEER EXPERIENCE			
	Job Title		
	Phone		
Duties			
Date (From/To)	Inh Title		
	Job Title Phone		
Date (From/To)	lah Titla		
	Job Title Phone		

Haygood Preschool Camp Counselor Questionnaire

1.	Tell us why you are interested in becoming a camp counselor this summer.
2.	As a camp counselor at Haygood, list some goals you hope to accomplish.
3.	List some experiences you have had that may have prepared you to be a camp counselor, i.e. babysitting, schoo clubs, extracurricular activities, etc.
4.	As a camp employee, you will be required to participate in daily physical activities. Do you have any health concerns that would prevent your participation in these activities? If yes, please explain:
lette	r of recommendation from a teacher, coach, youth leader, pastor or other non-familial adult must be attached.
plicant	's Signature Date

RETURN COMPLETED APPLICATION ALONG WITH LETTER OF RECOMMENDATION TO:

Haygood Preschool Attention: Morgen Smith, Director 1015 East Rock Springs Rd. NE Atlanta, GA 30306

OFFICE USE ONLY			
Date received	Accepted	Declined	

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