

Counselor-in-Training (CIT) Leadership Program Application 2024

Santa Fe College (SF) is committed to maintaining a work and educational environment that embraces diversity and where no member of the college community is excluded from participation in, denied the benefits of, or subject to discrimination in any college program or activity based on: their race, ethnicity, national origin, color, religion, age, disability, sex, pregnancy status, gender identity, sexual orientation, marital status, genetic information, political opinions or affiliations, or veteran status. This commitment applies to employees, volunteers, students, and, to the extent possible, to third parties, applicants for admission, applicants for employment, and the general public. For further information see: http://www.sfcollege.edu/eaeo/. Lara Zwilling, Equity Officer and Title IX Coordinator 3000 NW 83rd Street, Building R-Annex, Room 113, Gainesville, FL 32606, Phone: 352-395-5950; Email: equity.officer@sfcollege.edu

For over 20 years, Santa Fe's Community Education program has brought College for Kids programs to our community. This year we are offering 3 one-week camps with the option of either full or half-day for campers (July 8 thru July 26, 9 am to 4 pm, Monday thru Friday). *Parents will drop off/pick up their child in the classroom*.

The mission of the Santa Fe College Counselor-in-Training (CIT) Leadership Program is to help develop the leadership skills of the youth in our community. The program's purpose is to increase the awareness of personal responsibility and character development. This unique experience will give the participant an understanding of commitment and the need for positive relationships with peers and adults as it correlates to teamwork.

Participants will be asked to assist in many hands-on activities to realize the maximum benefits of the program. They will be assigned to work with College for Kids instructors. Their primary responsibilities will be to assist with daily camp group activities such as morning drop-off, afternoon pickup, and general operations in the classroom. The CIT students will also learn about college, career & scholarship options, as well as leadership training.

CIT's are required to complete a Level II background screening & fingerprinting each year, which will be completed at ARC of Alachua County. This is required for anyone who works in direct contact with children. CIT's will be given the paperwork and instructions during orientation for scheduling their fingerprinting/background screening. Student's will need to know their social security number and have a photo ID. Students will be given the paperwork and instructions at orientation for scheduling fingerprinting at ARC. All CIT's are required to commit to at least two weeks (out of the 3 week camp sessions).

There are no guarantees that your child will be selected for the CIT program. The applicant must participate in a mandatory training program on June 7^h from 12 pm – 3 pm if accepted into the program. The training is comprised of leadership training, team building, conflict resolution, a SF Achieve workshop, other leadership skills, safety, and College for Kids policies. The cost is \$120.00 for the 3-week session, which will include 3 camp shirts. For more information and to see what a typical day consists of as a CIT, please visit https://www.sfcollege.edu/cfk/.

Remember: The CFK program can be used for school service hours. The Santa Fe College for Kids CIT coordinator will provide a certificate for service hours completed at the end of camp.

If you have any additional questions or concerns, you may contact Rosalind Roberts at (352) 395-5193 or rosalind.roberts@sfcollege.edu.

Thank you for your interest in Santa Fe College for Kids Counselor-in-Training (CIT) Leadership Program!

Sincerely,

Tanasha Reshard

Tanasha Reshard, CIT Coordinator Santa Fe College

Counselor in Training (CIT) Leadership Program Information

Application period:

- Due by May 10, 2024 (Incomplete or late applications will not be accepted)
- Applicant *must* commit to at least 2 weeks of camp.
- Applications may either be emailed to <u>rosalind.roberts@sfcollege.edu</u>/ OR mailed to Rosalind Roberts at: Community Education, 401 NW 6th Street, Room DA-100, Gainesville, FL 32601

Cost: \$120.00 per 3-week camp session

College for Kids (CFK) Schedule:

- Week 1: July 8 12, 2024
- Week 2: July 15 19, 2024
- Week 3: July 22 26, 2024
- Camp hours are 9 a.m. to 4 p.m.; Monday-Friday

<u>Eligibility</u>: Teens ages 15-18 and students entering 10th through 12th grade by Fall 2024.

Requirements:

- Completed Application form
- Completed Release forms
- Completed Acceptance of CIT Rules form
- Completed Use of Photograph forms
- 2 Letters of Recommendation from teachers or professionals in the community
- Interviews will be scheduled via email for May 14 May 17 from 2 p.m. to 6 p.m. via ZOOM

Notification of acceptance: Accepted applicants will be notified through email by May 24th.

<u>Mandatory orientation</u>: June 7, 2024, from 12 pm – 3 pm. The training is comprised of leadership training, team building, conflict resolution, a SF Achieve workshop, leadership skills, a safety workshop, and College for Kids policies.

Availability: Applicant must be available for at least 2 weeks (out of the 3-week camp sessions).

- <u>Uniform:</u> Counselor-in-Training (CIT) students must wear their staff shirts each day of camp. They must also wear khaki pants or shorts each day. Shorts must be of an appropriate length. If you hold your arms down to your sides, your shorts should be longer than your fingertips. Sneakers must be worn each day. A CIT who is not dressed appropriately will be asked to go home and change.
- <u>Community Service Hours</u>: The CFK program can be used for school service hours. The Santa Fe College for Kids CIT coordinator will provide a certificate for service hours completed at the end of camp.

Guidelines for Santa Fe College Counselor-in-Training Leadership Program

- Santa Fe College CIT's must always arrive on time and wear appropriate clothing. If an emergency arises, you must contact the College for Kids coordinator.
- Santa Fe College CIT's must always handle themselves professionally.
- Santa Fe College CIT's must use common sense when interacting with CFK students, knowing that you are setting an example.
- Santa Fe College CIT's must treat ALL CFK students with the same respect and enthusiasm when interacting with them in the program.
- Santa Fe College CIT's must let their instructor know of any problems in the group immediately.
- Santa Fe College CIT's must report any accidents to your instructor immediately, no matter how minor.
- Santa Fe College CIT's should participate in all classroom activities under the direction of the instructor.
- All discipline procedures within the group should be at the discretion of the instructor.
- Santa Fe College for Kids CIT's may **NOT** use their cell phones for texting or phone calls at any time during camp, except in the case of an emergency.

Remember, you are here to assist the instructor. Instructors depend on you to be another source of assistance.

Please enjoy the summer, enjoy getting to know each student, and above all else, remember that you are a role model for all CFK students, so give it your all!

By signing below, you understand the responsibilities of your position with the Santa Fe College Counselor-in-Training (CIT) Leadership program. Should you receive three reprimands during the summer, it is up to the discretion of the program coordinator to terminate your position in the CIT program.

| Applicant Name (Print) | | Date | Applicant Signature |
|------------------------|------|---------------------|---------------------------|
| Parent/Guardian Name | Date | Relationship to CIT | Parent/Guardian Signature |

Counselor-in-Training Leadership Program Application

| PLEASE PRINT CLEARLY | | |
|--|--|---|
| Name: | Current Age/Grade:/ | Date of Birth: |
| Circle T-shirt size: S M L XL 2XL | | |
| Applicant Email: | Parent Email: | |
| Please provide <u>accurate</u> emai | il addresses that are <u>checked fre</u> applicant. <u>Print clearly!</u> | equently by the parent and the |
| Address: | City: | Zip Code: |
| | _ Cell Phone: | |
| Briefly describe any relevant work and | l/or volunteer experience you may have | :: |
| | | |
| | | |
| Have you been a College for Kids (CFK) | camper or CIT previously? If so, when? | |
| | | |
| | | |
| program. If I am accepted, I ag handbook that will be given to me | for a CIT Leadership program position gree to follow the policies and procea e at orientation. If I am unable to up spelled from the CFK program withou | lures as described in the program hold these standards, I understand I |
| Applicant Signature: | | Date: |
| | | |

Personal Recommendation Form

The applicant listed below is applying to be a Counselor-in-Training (CIT) students for Santa Fe College for Kids program. The Santa Fe College Counselor-in-Training (CIT) Leadership Program has been established to help develop the leadership skills of the youth in our community. The program will increase the awareness of personal responsibility and character development. It will instill an understanding of commitment and the need for positive relationships with peers and adults as it correlates to teamwork. Please take a few moments and let us know about the applicant. Thank you for this information.

| CIT Applicant Name: | | |
|---|----------------|---------------|
| How long have you known applicant? | | |
| In what capacity have you known the applicant? Personally | Professionally | Educationally |
| What are applicant's strengths? | | |
| | | |
| | | |
| What are applicant's weaknesses? | | |
| | | |
| What other information would you like us to know about the anal | | |
| What other information would you like us to know about the appl | | |
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| | | |

Name of Person Submitting Recommendation

Email



Personal Recommendation Form

The applicant listed below is applying to be a Counselor-in-Training (CIT) students for Santa Fe College for Kids program. The Santa Fe College Counselor-in-Training (CIT) Leadership Program has been established to help develop the leadership skills of the youth in our community. The program will increase the awareness of personal responsibility and character development. It will instill an understanding of commitment and the need for positive relationships with peers and adults as it correlates to teamwork. Please take a few moments and let us know about the applicant. Thank you for this information.

| CIT Applicant Name: | | | |
|--|----------------|---------------|--|
| How long have you known applicant? | | | |
| In what capacity have you known the applicant? Personally | Professionally | Educationally | |
| What are applicant's strengths? | | | |
| | | | |
| | | | |
| | | | |
| What are applicant's weaknesses? | | | |
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| What other information would you like us to know about the a | | | |
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Name of Person Submitting Recommendation

Email

$S_F \stackrel{SANTA}{=} F_{\text{Counselor in Training Program}} S_F$

Santa Fe College Audio/Video and Photography Release

I, the undersigned, grant to Santa Fe College ("SF") and its District Board of Trustees, and all of its agents, trustees, employees, designees, legal representatives, and all persons acting under their permission or authority (hereafter "Releasees"), the unrestricted, irrevocable, and perpetual right to use – including, without limitation, copyright, publish, re-publish, broadcast, transfer, alter, distribute, display, perform, reproduce, and incorporate into other works – any photograph, video, digital file, or other likeness (hereinafter collectively the "images") of me in SF's possession or control in any medium now known or in the future invented, for any purpose, including without limitation, trade, solicitation, promotional, advertising, and marketing, without compensation, prior inspection, or further permission from me.

I consent to each and every use by Releasees of each image of me, and I understand I will not be compensated for same. Such uses may include use in a program, catalog, schedule, newspaper, brochure, advertisement, or other publication or recording that describes, portrays, publicizes, or advertises SF or any College operation, and every reproduction, replication, or other re-use of the same.

I am fully aware that my likeness may appear in materials available to students, parents, faculty, or staff of SF, and individuals outside of the SF community. I further understand that SF is under no obligation to use the images and has made no representations to me in this regard.

I release, hold harmless, and agree not to bring any legal action against any and all Releasees with regard to all claims and liability relating to the audio/video/photograph, including, but not limited to, any claims for defamation, invasion of privacy, invasion of right of publicity, misappropriation of likeness, infliction of emotional distress, negligence, any right, title or interest in the images, or any other physical or monetary injury, and including any blurring, distortion, alteration, optical illusion, or use in composition form, whether intentional or otherwise, that may occur or be produced in taking of said photograph or likeness or in any subsequent processing of same, or any publication or uses of same.

If 18 or older:

| l, | , Student ID #, am 18 years of age or older, and I acknowledge a | | der, and I acknowledge and |
|----------------------------|--|--|-----------------------------|
| consent to and agree to | be bound by the terms and conditions set for | orth above. | |
| Signature: | Print Name: | Date: | Phone: |
| | Email: | | |
| If younger than 18: | | | |
| l, | , Student ID # | , am younger than 18 year | s of age, and I acknowledge |
| and consent to and agre | e to be bound by the terms and conditions s | et forth above. | |
| l, | , am the parent/guardian of th | ne minor child listed above, and, on m | y own behalf and on behalf |
| of said minor child, I ack | nowledge and consent to and agree to be bo | ound by the terms and conditions set | forth above. |
| Minor Signature: | | | |
| Print Name (Minor): | | | |
| Parent/Guardian Signatu | ure: | | |
| Print Name (Parent/Gua | rdian): | | |
| | rd | | |

Santa Fe College, 3000 NW 83 Street, Gainesville, Florida 32606

CIT EMERGENCY CONTACT INFORMATION FORM

(MUST PROVIDE TWO CONTACTS)

| CIT Name: | | | |
|--------------------------|----------------|--------|--|
| Last | First | Middle | |
| Address: | | | |
| | | | |
| Relationship to Student: | | | |
| Daytime Phone: | Evening Phone: | | |
| | Email: | | |
| | | | |
| Relationship to Student: | | | |
| Daytime Phone: | Evening Phone: | | |
| | Email: | | |
| Known Allergies: | | | |

Please note that we expect CIT students to stay away from foods that cause allergic reactions, to take any medications needed at home, and to let the program coordinator know if they have any problems.

People with parental/guardian permission to pick up student:

| Name | Phone | Relationship |
|------|-------|--------------|
| Name | Phone | Relationship |
| Name | Phone | Relationship |

SANTA FE COLLEGE ASSUMPTION OF RISK, RELEASE OF LIABILITY, INDEMNIFICATION, AND HEALTH CARE AUTHORIZATION

As the parent or legal guardian of the above student, who is a minor child under the age of eighteen (18) (hereinafter "my Child"), and in exchange for the benefits to be derived by my Child's participation in Santa Fe College's College for Kids ("Program"), I hereby agree, on behalf of myself and my Child, to the following:

ASSUMPTION OF RISK: I hereby grant my permission for my Child to participate in the Program, which will include classes and sports. I understand that I am responsible for all transportation. I am fully aware of the risks connected with my Child's participation in the Program, and hereby elect to allow my Child to voluntarily participate in the Program, knowing that the Program may pose risks, including the risk of serious physical injury, temporary or permanent disability, and death, as well as economic and property loss. On behalf of myself and my Child, I VOLUNTARILY ASSUME ALL RESPONSIBILITY FOR ANY RISKS OF LOSS, PROPERTY DAMAGE, OR PERSONAL INJURY, that may be sustained by my Child, or any loss or damage to property owned by myself or my Child, as a result of my Child being engaged in the Program, WHETHER CAUSED BY THE NEGLIGENCE OF SANTA FE COLLEGE, ITS EMPLOYEES, STUDENTSS, AGENTS, or otherwise.

RELEASE OF LIABILITY: On behalf of myself and my Child, as well as our respective estates, heirs, administrators, executors, and assigns, I hereby RELEASE and DISCHARGE the District Board of Trustees of Santa Fe College, Florida, and the State of Florida and their respective trustees, employees, agents, and assigns (hereinafter "RELEASEES") from any and all liability, arising out of any loss, damage, or injury, including death, that may be sustained by me, or my Child, to any property belonging to me or my Child, including but not limited to any claims, demands, actions, causes of action, judgments, damages, expenses and costs, including attorneys' fees, which arise out of, result from, occur during or are connected in any manner with my Child's participation in said Program, including such loss, damage, injury or death that may result from RELEASEES' own negligence or otherwise, and I further WAIVE any right I might otherwise have and COVENANT NOT TO SUE said RELEASEES in connection with any such liability.

INDEMNIFICATION: I further hereby AGREE TO INDEMNIFY, DEFEND AND SAVE AND HOLD HARMLESS the RELEASEES and each of them, from any loss, liability, damage or costs, including court costs and attorneys' fees, they may incur as a result of any claims, demands, actions, causes of action, damages, or judgments, which arise out of, occur during, or are in any way connected with my Child's participation in the Program or any related travel or activities.

LAW AND VENUE: I hereby further agree that this document shall be construed in accordance with the laws of the State of Florida, and that venue shall be in Alachua County, Florida. If any portion hereof is held invalid, the balance hereof shall continue in full force and effect.

HEALTH CARE AUTHORIZATION: I authorize Santa Fe College to perform any acts which may be necessary or proper to provide emergency health care to my Child in the event that I and/or the emergency contact listed above cannot be reached, including consent to and authorization of medical procedures by qualified, licensed physicians, dentists, hospital or other emergency medical personnel, as they, in the exercise of their profession and in their sole discretion, may deem necessary. I understand that I am responsible for all costs and expenses of such medical treatment.

Cont. on page 11

In signing this agreement, I acknowledge and represent that I have read and understand it; that I sign it voluntarily and for full and adequate consideration, fully intending to be bound by the same; and that I am at least eighteen (18) years of age, fully competent, and the legal parent or guardian of my Child.

| Child's Printed Name: | / |
|--------------------------------|---|
| Child's Signature: | |
| | |
| Parent's Printed Name: | |
| Parent's/Guardian's Signature: | |
| Date: | |

* Santa Fe College will keep this form on file for future reference. Please notify Santa Fe College staff of any changes to the above information.