



Madrichim-in-Training
Application Supplement for Students Entering 8th & 9th Grade
Summer 2019
Young Israel of East Brunswick

Name _____ Date of Birth _____ MIT's Phone _____

MIT's E-mail Address: _____

Name of School as of September 2019 _____ Grade Entering September 2019 _____

Are you receiving any special services? _____

Synagogue Affiliation _____ Rabbi _____

Prior Camp Experience

Name of Camp	Location	Camper or CIT
_____	_____	_____
_____	_____	_____

Other Related Experience

Work Experience _____

Leadership Experience _____

Chesed Experience _____

Certifications: Please indicate place certified and level achieved.

Swimming _____ First Aid _____

Babysitting Course _____ Other _____

Camp Skills: Use one check to indicate those skills you have. Use two checks to indicate those you can lead.

- | | | | |
|--|--|-----------------------------------|--------------------------------------|
| <input type="checkbox"/> Arts & Crafts | <input type="checkbox"/> Nature/Hiking | <input type="checkbox"/> Drama | <input type="checkbox"/> Music* |
| <input type="checkbox"/> Israel Dance | <input type="checkbox"/> Other Dance* | <input type="checkbox"/> Cooking | <input type="checkbox"/> Photography |
| <input type="checkbox"/> Sports* | <input type="checkbox"/> Singing | <input type="checkbox"/> Swimming | <input type="checkbox"/> Other* |
| <input type="checkbox"/> Tefillah | *Please Indicate _____ | | |

Please list two references (Name & Position, Phone, E-Mail): _____

Applicant's Signature _____ Date _____

Parent/Guardian Signature _____ Date _____