



For Leader-in-Training II Applicants:

While last year's program focused much on building basic leadership & team work skills, the LIT II program will be mainly focused on working directly with campers and staff in different program areas and on decks. You will also participate in a portion of staff training. During staff training part of your time will be spent in sessions with the 2010 Bearskin Meadow Camp staff, the remaining time will be spent with your fellow LIT IIs gaining valuable skills for the Kids Camp to follow. For the LIT II program you will be living on decks and fully engaged with aspects of counseling and running programs. **This program gives its participants first priority in becoming staff at Bearskin Meadow Camp once the participant reaches 18 years of age upon successful completion and positive performance evaluation.**

IMPORTANT DETAILS

Are you qualified to apply for the Leader-in-Training II Program?

- ✓ You have taken part in the LIT I program and have been invited to return to the LIT II program, or demonstrate equivalent experience (contact the Camp Manager directly to determine if you have equivalent experience).
- ✓ You must complete the application below **in full.**
- ✓ You demonstrate maturity, leadership skills, communication skills, a willingness to learn, and a positive attitude. You want to be a participant in the program.
- ✓ You have an interest in working with children.
- ✓ You do or do not have diabetes.
- ✓ You understand that this program is geared to develop your skills and in doing so you will be unable to return to "camper mode" as a teen camper after participating in the program. Keep in mind that this will affect your ability to be a teen camp camper this coming summer.
- ✓ You will be expected to up-hold the mission of the Diabetic Youth Foundation.

Other important information you should know:

- ✓ This is a two year program consisting of LIT I & LIT II. While the first year of the program emphasizes the foundations of leadership and teaches skills of working with children at camp, during the second year program you spend most of your time is spent working & living with campers.
- ✓ Space is limited in the LIT II program and will be reserved for applicants demonstrating maturity, leadership skills, communication skills, a positive attitude and growth.
- ✓ Limited scholarships are available for the Leader-in-Training program.
- ✓ Upon completion of the LIT II program you will be provided, upon request, a community service letter that may used to fulfill hours of community service and volunteerism.
- ✓ Upon successful completion of this two year program, with positive performance evaluations, you will be given top priority in becoming a staff at Bearskin Meadow Camp. However, this is not a guarantee of employment.
- ✓ **While you are responsible for completing the application below, your parent/legal guardian must send in the BMC Registration form with deposit. The deposit shall be held until you are accepted into the program. The registration form can be sent with this application or separately.**

HOW TO APPLY AS A LEADER-IN-TRAINING II APPLICANT:

1. Complete and send in, email or fax to the Diabetic Youth Foundation. **Please print legibly. You and your parent/guardian must have a current email address to apply.** Email is the main method for which important information is relayed and thus your email should be checked regularly. If you and/or your parent or guardian do not have regular access to email please contact the Camp Manager for other arrangements.
2. **Have your parent complete the regular Bearskin Meadow Camp registration form (see final page) and send that in with their deposit. The deposit will be held until you are accepted into the program.**
3. Wait to be contacted by the Camp Manager or the LIT Director, at which point an in-person or phone interview may be set-up & conducted. Initial contact by the Diabetic Youth Foundation occurs within three days of receiving the application by the organization, and may be made by phone or email. Interviews will begin in mid-March or early April.
4. If accepted, your parent will be sent all of the necessary information to complete. Have you and your parents complete all paperwork and submit to the Diabetic Youth Foundation in a timely manner.
5. Expect a "Welcome to the LIT II Program" package to arrive prior to the start of camp.
6. Get ready for a summer at Bearskin Meadow Camp that includes lots of growth, learning and adventure!

Mission of the Diabetic Youth Foundation:

To improve the quality of life for children, teens and families affected by diabetes. The Foundation provides education & recreation within a supportive community, encouraging personal growth, knowledge and independence.





2010 LEADER-IN-TRAINING II APPLICATION

This application is for those interested in applying to the Leader-in-Training II program. This program is for 17 year olds, and for those who have graduated from LIT I or demonstrate equivalent experience. Please note that the application must be completed by the applicant and not the legal guardian or parent (please note guardian/parent signatures are required on last page).

Mail Application To:

Jennifer Goerzen, Camp Manager
Diabetic Youth Foundation
LIT Application
5167 Clayton Road, Suite F, Concord, CA 94521
Phone: (925) 680-4994/Fax: (925) 680-4863, www.dyf.org, goerzen@dyf.org

U.S. FOREST SERVICE INFORMATION

Bearskin Meadow Camp is an equal opportunity program because acceptance and participation in the program are the same for everyone without regard to race, color, religion, national origin, age, sex or handicap. Discrimination in any form is strictly against agency policy and should be reported to the: Secretary of Agriculture, Washington, D.C., 20250.

Bearskin Meadow Camp operates under a special permit from the Sequoia National Forest.

Applicant:

If you have any questions or concerns regarding the application process or camp life in general, please contact the Camp Manager at the above phone number, or by email at goerzen@dyf.org. PLEASE PRINT LEGIBLY. **Space is limited in the LIT II program and will be reserved for applicants demonstrating maturity, leadership skills, communication skills, willingness to learn, and a positive attitude. You are not required to submit references unless requested by the Camp Manager and/or the LIT Director.**

Last Name: _____ First Name: _____

Date of birth (optional m/d/y): _____ Are you 17 years old? Yes No

Mailing Address: Street: _____ City: _____

State/Province: _____ Zip/Postal Code: _____ Country: _____

Phone: (____) _____

*Please note that all mail will be sent to this address including evaluations.

You and your parent/guardian must have a current email address to apply to Bearskin Meadow Camp.

Applicant's Current email address: _____

Parent/Guardian's Current email address: _____

Please indicate if you are certified or licensed for any of the following. You must provide copies of your certification with this application:

	Expiration (m/d/y)	Granting Organization
Driver's License #: _____		
Standard First Aid		
CPR Infant, Child & Adult		
Life Guarding		
Water Safety Instructor		
Wilderness First Aid/Responder <small>(please circle)</small>		
Archery		
Other: _____		

Employment/Volunteer History - Please include recent jobs/volunteer positions related to camping, children, diabetes, school, clubs and so on.

Position:	Dates (m/d/y):	Employer/Supervisor:	Phone #:
			()
			()
			()

Please complete the following questions clearly and concisely. Please attach a sheet if necessary.

1. Why do you want to be a Leader-in-Training II at Bearskin Meadow Camp?

2. Last year you participated in the LIT I program. Please list some key things that you feel you learned in that program about leadership and teamwork.

3. Please define what leadership means to you and why it is or why it is not important in a camp environment.

4. Please describe the differences between being an LIT and a camper. How do you think you handled those differences in last year's program?

5. What would you like to say you got out of being an LIT II when you are done with the program? Please list some of your goals.

6. If you were in charge of an LIT II program what would you teach to the participants?

7. Please describe a time in the last year when you demonstrated one or more of the leadership skills you gained from the LIT I program.

8. Please feel free to add anything else you would like us to know about you:

The following must be read by both LIT applicant & parent/legal guardian, and initialed by both. By reading and initialing the following you understand that as an LIT:

Parent/Guardian Applicant

_____ Because I am underage, there will be specific times in which I may be required to be supervised by a staff member. There will be times however when I will be able to work and walk throughout camp independently.

_____ I will not be permitted pay phone access during my time at camp. In the event of an emergency or need to touch base with home, all phone calls will be made through the LIT Director and/or Camp Director.

_____ At no time will I ever be left alone with a camper.

_____ I must provide my own sleeping bag.

_____ Camp requires participation in a schedule of vigorous activities at an elevation of 6,000 feet. Excellent physical condition is required.

_____ I am a role model for children. Bearskin Meadow Camp has strict appearance and safety expectations. Appearance and attire must be appropriate. For example, jewelry, in piercing is only acceptable in the ear with non-dangling studs. Any tattoo that will be seen by campers must be of material appropriate for children. This is not meant as an all-inclusive list, other examples will be outlined in the Personnel Policies. **I understand that halter tops, low cut tank tops, and exposed midriffs/boxer shorts are not allowed.** The LIT Staff and Camp Manager's discretion will be used in regards to any appearance modification issues.

_____ The use of or possession of **RECREATIONAL DRUGS AND/OR ALCOHOL/AND OR THE USE OF TOBACCO PRODUCTS including cigarettes and tobacco on or around the camp property at any time during my camp stay will be grounds for immediate termination.**

_____ I understand that Bearskin Meadow Camp is a drug free environment. The manufacture, distribution, possession or use of controlled substances are strictly prohibited.

_____ Exclusive relationships and/or sexual contact in any nature with a camper, staff or another LIT is strictly prohibited.

_____ I am expected to learn, fully participate and work with children and my peers in a rigorous learning environment. I understand that if I have questions or concerns I am to take those immediately to the LIT Director and/or Camp Director.

_____ I will respect myself and others, the facility and its surrounding property. I will not take others personal property or destroy facilities, personal property or surrounding areas.

_____ If I chose to drive my own car to camp I must have a parent/legal guardian sign a **LIT Transportation Authorization form.**

_____ As an LIT II I will be evaluated on my performance. I understand that completion of the second year of the program does not guarantee acceptance as a Bearskin Meadow Camp staff for the following camp season.

_____ I may be requested to take an 8-hour American Camp Association on-line course prior to starting the LIT II program .

_____ I have read and understand the requirements and responsibilities of this position. I certify that all the statements contained in this application is true to the best of my knowledge. I understand that false statements shall be sufficient cause for dismissal. In the case of dismissal program fees will not be refunded and I risk losing the privileges of participating in future camp programs either as a camper or as a staff.

Name of Signing Parent (Please print) _____

Parent's Signature _____ Date (m/d/y) _____

Name of LIT Applicant (Please print) _____

Applicant's Signature _____ Date (m/d/y) _____

2010 / 2011 REGISTRATION FORM

This form can be used to register for both Year-Round and Bearskin Meadow Camp Programs and can be used to register for more than one program. Once your registration is received by DYF, you will receive additional information and forms. This additional paperwork must be completed and returned in order for your child to attend the program. **PLEASE PRINT ALL INFORMATION.**

2010/2011 DYF Program/Session	Participant's Last Name	Participant's First Name	Gender (M/F)	Date of Birth	Month/Year of Diagnosis	School Grade in Fall	Age At Program Yrs/Months	Previously Attended?
FOR EXAMPLE: Family Camp 2	Simpson	Ellen	F	12/7/95	09/95	10th	15yrs/3mos	yes

FAMILY CAMP ONLY: # of attending adults _____ Total # of children _____ # of children under 2 at time of camp/program _____

Send mail to: Address _____ City _____ State _____ Zip _____

Email Address: _____

Provide information of parent(s) / legal guardian:

1. Name _____	2. Name _____
Relationship _____	Relationship _____
Home Phone (_____) _____	Home Phone (_____) _____
Business Phone (_____) _____	Business Phone (_____) _____
Cell Phone (_____) _____	Cell Phone (_____) _____
Occupation _____	Occupation _____
Employer _____	Employer _____

Please let us know how you found out about DYF. If applicable, please provide name of specific person... so we can thank them!

Individual's Name/Organization _____ Web Other _____

FINANCIAL INFORMATION Check one of the following regarding your ability to pay program fees.

Full fee will be paid at least 30 days prior to the start of the camp session Need Extended Payment Plan (Available with valid credit card on file only)

Amount of Deposit Enclosed \$ _____ or Charge my Credit Card \$ _____

A \$150 deposit (\$50 non-refundable) is required per registration.

Type of Credit Card: Visa MasterCard American Express Discover Card

Credit Card # _____ Expiration _____ Today's Date _____

Card Verification Code (Last 3 digits of code on signature line located on back of card) _____ Credit Card Billing Zipcode _____

Printed Name of Cardholder _____ Signature _____

SCHOLARSHIP INFORMATION LIMITED SCHOLARSHIPS ARE AVAILABLE FOR BEARSKIN MEADOW CAMP ONLY.

Need Payment Plan & Partial Scholarship Need Full Scholarship

If applying for a scholarship, please complete the enclosed "Scholarship Application Form" and submit it to DYF with your registration form.

TRANSPORTATION INFORMATION TRANSPORTATION IS FOR BEARSKIN MEADOW CAMP ONLY, UNLESS OTHERWISE SPECIFIED.

Round-trip transportation is available for Kids and Teen Camp for \$150. If you don't check an item in this section, we assume you will not need transportation provided by the DYF. **Transportation additions or removals must be made through the DYF office 30 days before the camp session begins. There is no guarantee that we are able to accommodate transportation needs. Space is limited.** Check a city below to request transportation (\$150 round-trip).

Locations: Bakersfield Concord Fresno Los Angeles Modesto Santa Rosa San Francisco Visalia

RETURN TO: Diabetic Youth Foundation: 5167 Clayton Road, Suite F, Concord, CA 94521 or FAX: 925-680-4863