

Exploring New Horizons Outdoor Schools

“Dedicated to enriching the lives of young people through the awareness of the beauty and diversity of nature”

www.exploringnewhorizons.org · (831)338-3077

Loma Mar: 650.879.0608 · Sempervirens: 831.338.3077

COUNSELOR APPLICATION

Name _____ Email _____

Cell Phone _____ Grade _____ School _____

Address _____ Zip _____

Have you: Attended an ENH program as a student? _____ Attended an ENH program as a counselor? _____

Elementary school you attended _____

Please feel free to attach pages if you wish.

1. Why do you want to be an outdoor school counselor?

2. How will you be an effective role model for the students you supervise?

3. Please list your experience working with young people.

4. What do you enjoy doing in your leisure time?

5. Please indicate your experiences and interests in the outdoors.

Have you ever been convicted of a criminal offense (felony or serious misdemeanor)? Yes No

Related offenses that are more than two years old need not be listed.

If "yes", please state the nature of the crime(s), when and where convicted and disposition of the case. (A conviction record will not necessarily be cause of disqualification. Please list the nature of the offense, the date of the offense, and surrounding circumstances and the relevance of the offense to the position applying for.)

If you are a high school **GIRL**, and if necessary, would you be willing to be a counselor for a boys cabin if we do not have enough high school boys as counselors? Yes No

Parents/Guardians:

I understand that my child is applying as an outdoor education cabin counselor. My child has the maturity and ability to supervise children in the fifth and sixth grade. I understand that if selected, my child will miss school for a period of four or five days.

Parent/Guardian signature

Date

Thank you. You will be receiving more information. If you have questions, please contact ENH Loma Mar at 650.879.0608 or ENH Sempervirens at 831.338.3077.

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COUNSELOR TEACHER PERMISSION FORM

I, _____, have applied for the position of cabin counselor with Exploring New Horizons Outdoor Schools. **In order to be granted an interview, attend a training workshop, and serve as a cabin counselor at the outdoor school, I must have approval of all my teachers.** Teachers, please sign your name indicating your permission for me to attend an interview, training workshop and serve as a counselor for a week. I understand that you may withdraw your permission at any time should my grades or citizenship drop to an unsatisfactory level.

“I am granting my permission for the above-named student to be interviewed by the outdoor education team as a candidate for cabin counselor. I understand that if this student is chosen to serve as a cabin counselor, he/she will be absent for a full week of classes and will have to make up all missed work.”

STUDENTS: Please print the class and teacher’s name. You must also get signatures from the attendance office as well as the principal.

TEACHERS: Please add signature.

CLASS	TEACHER	TEACHER’S SIGNATURE

Principal’s signature: _____

Attendance office: _____

General Information

- All students who attend the outdoor school as cabin counselors are responsible for making up all missed school work.
- The students who are selected as counselors will also be required to attend a mandatory training workshop after school.

THANK YOU FOR YOUR SUPPORT OF THE OUTDOOR EDUCATION PROGRAM.

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COUNSELOR RESPONSIBILITY CONTRACT

The primary responsibility of an Exploring New Horizons Outdoor Schools cabin counselor is the emotional well-being and safety of the children in her or his care. The following contract clarifies the responsibilities of the counselor to ensure that children have a safe, positive experience.

Please initial the following statements and sign the document in the appropriate place.

I must ensure that I guide the children in my care fairly and consistently. I will take care to treat them with respect. _____

I will remain with the children unless it is my specified time off. I will report all injuries, illnesses, and potentially dangerous situations. _____

Because the children are easily influenced, I will protect them from foul; language and inappropriate or frightening stories and activities. No uncomplimentary remarks about race, gender, religion, sex or sexual orientation will be tolerated in my cabin group. _____

I agree that while at the outdoor school I will not use tobacco products, alcohol, or illegal drugs. _____

I understand that for my own protection, I should not touch children of the opposite sex and that I must never hit or mishandle a child. _____

I will not allow any student to enter a cabin that she or he is not assigned to, nor encourage or lead cabin raids. _____

If I have any difficulty, I understand the outdoor school staff is available to help me and it is my responsibility to ask for help when it is needed. _____

I understand that I must follow all of the rules of Exploring New Horizons Outdoor Schools. I understand that any infraction of the above statements can result in my immediate dismissal. _____

I have read and agree to the responsibilities listed above.

Print your full name

Sign your full name

Date