

Leader in Training Application

Date o	f Application						
(Pleas	e type or print)						
First N	lame		Last Name				
Home	Address		Last NameCity	<i></i>	_State	Zip	
Phone_		Cell	E-Ma	il			
may no	ot be a family mer	mber or friend. (ex: teacher, former ca Phone nu	amp counselor, co mber:	ach, etc	c.)	
1.	Why do you wan	nt to be an LIT (I	Leader in Training) for	or The Latin Day	Camp?		
2.	Describe two pas	st work/voluntee	r experiences(i.e. bal	oysitting, newspap	oer rout	e, etc.)	
3.	What special tale	ents/qualification	ns do you feel you wi	ll bring to this pos	sition?		
4.	What interests yo	ou about working	g with children?				
5.	What are some a	reas in yourself	that you feel are chal	lenges/ would like	e to wor	·k on?	
6.	What are the three	ee most importar	nt responsibilities wh	en working with o	children	?	
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