

Camp Woodie

Counselor in Leadership Training (CIT) Application

Please complete this application to the best of your ability and submit to Camp Woodie by email or mail:

9833 Old River Rd
Pinewood, SC 29125
campwoodie@scwa.org

Date: _____ Name: _____

Age: _____ Physical Address: _____

City: _____ State: _____ Zip code: _____

Phone Number: (_____) _____ - _____

Email: _____

Name of High School: _____

Grade last completed: _____ GPA: _____

Please list your Extracurricular Activities, Involvement, and/or Work Experience:

Why are you interested in becoming a CILT at Camp Woodie:

**Have you ever been to Camp Woodie (or other Camp)?
What was your most memorable experience & why?**

What should we do more of?

What do you hope to gain from your CILT experience?

Please list at least two references along with contact information and explain their relationship to you: