



Sam Houston State University
Recreational Sports
294-CAMP Fax: 294-1913
barkatcamp@shsu.edu
www.shsu.edu/~rca

For Office Use Only
Received:
By:
Interview:
Action:
Session:

2012 BEARKAT CAMP COUNSELOR APPLICATION

Date _____ SAM ID _____

Name _____ Birthdate _____ age _____

Email address _____ Gender: Female Male

Major _____ Minor _____

Permanent Address I am enrolled as a college:

Street _____ Freshman Sophomore

City _____ State _____ Zip _____ Junior Senior Graduate Student

Phone _____ Cell _____ (Expected) Graduation Date _____

Current Address Please check your choice of session(s):

Street _____ Session 1 August 5-8

City _____ State _____ Zip _____ Session 2 August 8-11

Phone _____ Both Sessions

Transfer

Please describe your involvement at SHSU. (Including current organizations you belong to and activities you participate in on and off campus.)

Why do you feel that you would make a good Barkat Camp Counselor?

What makes you proud to be a Bearkat?

What, if any, experience do you have as a camp counselor and/or camper?

Anything else you want us to know?

<u>Certifications</u>	<u>Organization</u>	<u>Expiration</u>	Others: _____
<u>Date</u>			<u>SHSU Faculty/Staff References (optional)</u>
<input type="checkbox"/> First Aid - _____	_____	_____	Name: _____
<input type="checkbox"/> CPR - _____	_____	_____	Phone: _____
<input type="checkbox"/> Lifeguarding - _____	_____	_____	Name: _____
<input type="checkbox"/> Water Safety Instruction _____	_____	_____	

By submitting this application and furnishing your campus ID you are giving the SHSU Recreational Sports office permission to verify your enrollment status, GPA and to view your disciplinary/student conduct record.