

Treasure Valley Scout Reservation  
Application for Counselor in Training (CIT) Program 2025

*This fillable PDF form requires Adobe Acrobat Reader. You can get it for free [here](#).  
This form is meant to be filled out using a tablet, laptop, or desktop computer.*

NAME \_\_\_\_\_ DATE OF BIRTH \_\_\_\_\_

YOUR AGE AS OF JUNE 29, 2025 \_\_\_\_\_

STREET ADDRESS \_\_\_\_\_

CITY OR TOWN \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

YOUR PHONE NUMBER \_\_\_\_\_  CELL  LANDLINE

YOUR EMAIL ADDRESS \_\_\_\_\_

PARENT 1 NAME \_\_\_\_\_

PARENT 1 PHONE NUMBER \_\_\_\_\_  CELL  LANDLINE

PARENT 1 EMAIL ADDRESS \_\_\_\_\_

PARENT 2 NAME \_\_\_\_\_

PARENT 2 PHONE NUMBER \_\_\_\_\_  CELL  LANDLINE

PARENT 2 EMAIL ADDRESS \_\_\_\_\_

*I am a registered member of Scouting America in good standing with the following unit:*

TROOP/ CREW NUMBER \_\_\_\_\_ CITY/TOWN LOCATED \_\_\_\_\_

RANK \_\_\_\_\_ POSITION \_\_\_\_\_

TROOP/ CREW LEADER NAME \_\_\_\_\_

TROOP/ CREW LEADER PHONE \_\_\_\_\_

TROOP/ CREW LEADER EMAIL \_\_\_\_\_

WHICH WEEKS DO YOU WISH TO ATTEND CIT? 14 year olds may attend for one week though two are recommended. 15 year olds are expected to attend for two weeks. The two weeks do not need to be consecutive.

JUN 29-JULY 4    JULY 6-11    JULY 13-18    JULY 20-25    JULY 27-AUG 1

SCOUT TRAINING AND EXPERIENCES (limit 2 lines)

NON-SCOUT TRAINING AND EXPERIENCES (limit 2 lines)

AQUATICS STATUS (ABILITY, MERIT BADGES, ETC.) (limit 2 lines)

HOBBIES, INTERESTS, SKILLS (limit 2 lines)

LIST AREAS OF CAMP YOU FEEL STRONG OR MOST INTERESTED IN (2 lines)

LIST ANYTHING YOU WANT TO IMPROVE ON AS A CIT (limit 2 lines)

**REMINDERS:**

- Your application must be submitted no later than Tuesday 7:00 p.m. of the week before your first week in the CIT program.
- You will be notified whether you are accepted as soon as possible after we receive your application.
- If your rank is below First Class, you may be placed on a wait list. If we have more applicants than openings, priority will go to those First Class and above.

**BY SUBMITTING THIS APPLICATION, YOU ATTEST TO THE FOLLOWING:**

- The information I have provided is complete and correct.
- I have notified or will notify my unit leader of this application.
- I have my parent's permission to make this application.
- I agree to follow all camp, staff, and CIT rules while in camp.

**\*\*\*WHEN COMPLETE, SAVE THIS FORM TO YOUR DEVICE AND EMAIL IT TO ALL THREE OF THE FOLLOWING\*\*\*.**

Camp Director Kelly Stickney [Kelly.Stickney@scouting.org](mailto:Kelly.Stickney@scouting.org)

CIT Director Mike McQuaid [mfm3981@comcast.net](mailto:mfm3981@comcast.net)

Your parent/ guardian