

**4-H EVENT/OPPORTUNITY:** 4-H Camp Counselor – Auglaize County 4-H Camp – June 10-14, 2025

**DATE / DEADLINE:** Applications are due to the OSU Extension Office no later than **January 2, 2025 by 4:30 p.m.**

**PROGRAM DESCRIPTION:**

The 4-H Camp Counselors are a group of 4-H teens selected to assist in being responsible for campers ages 9-15 during 4-H camp. As a result of participation, counselors will develop knowledge, skills, attitudes and aspirations needed for adult success, and the Auglaize County 4-H program will be strengthened and expanded. Roles and Responsibilities of 4-H Camp Counselors include:

- Attend required trainings prior to camp
- Market and promote camp
- Serve in a leadership and teaching role to other counselors
- Serve on committees or other groups to plan programs at camp
- Conduct self in an appropriate manner before, during, and after camp while serving as a role model to campers and peers
- Assist staff and other counselors with camp activities; work as a team to implement the activities
- Know and understand all safety guidelines, including emergency procedures, associated with the camp and program areas
- Follow and enforce camp rules
- Assure for safety of campers at all times including in cabins, sessions, and large group activities
- Be aware of child protection regulations and report any child abuse, sexual abuse, or neglect in accordance with university policy
- Identify and respond to camper behavior issues
- Ensure campers' health and hygiene, e.g., brushing teeth, eating meals, taking medication, etc.
- Promote camper participation during camp
- Lead and supervise campers in activities at camp including but not limited to songs, teambuilding challenges, group activities, challenges, etc.
- Teach and lead campers at workshops or during other components at camp (table setting, song leading, etc.)
- Mentor and give guidance to campers to encourage positive youth development and enhancement of life skills

**REQUIREMENTS:**

- Must be at least 15 years old by January 1, 2025.
- Must be a member in good standing with your 4-H club at the time of application and throughout the year.
- Must be able to get transportation to meetings and events as needed.
- Must complete a minimum of 12 hours of training. (2 of these hours must be on-site for first time counselors).
- Must complete Child Abuse Awareness training.
- Must Sign Standards of Behaviors, complete the Code of Conduct form, and have a current Ohio 4-H Health History form on file.
- **First time applicants must provide two references.** Your references must be over 21 and cannot be related to you. Give them the reference form (with your name written in the blank at the top of the form) and have them send to the Extension Office. They should not return the form to you. As a courtesy, you may want to provide a stamped envelope addressed to the office.
- If the individual is 18+ year old at least two months prior to camp, the individual must have their background check conducted.

**SELECTION PROCESS:**

- Individuals who complete the application and fulfill application requirements will be contacted regarding the selection process. Interviews will be conducted on Thursday, January 16, 2025.

**MEETING DATES/TIME/FREQUENCY/TRAINING**

- 4-H Camp Counselors meet the following dates throughout the year: Jan. 30, Feb. 13, Feb. 25, March 11, March 27, April 8, April 28, May 15, May 27 – 7:00 to 9:00 p.m. and June 3 – 6:30 p.m. All meetings are held at the Extension Office unless announced differently. Counselors are expected to notify the Extension Office if an absence is unavoidable.
- 4-H Camp Counselors will be trained on topics such as the camp counselor core competencies; risk management, including active shooter guidelines, emergency protocols, and child abuse recognition.

**TO APPLY:**

- ❑ Complete the application in its entirety. *Must be completed by the applicant.*
- ❑ **First time applicants must provide two references.** Your references must be over 21 and cannot be related to you. Give the person the reference form (with your name written in the blank at the top of the form) and have them send the completed form to the Extension Office. They should not return the form to you. As a courtesy, you may want to provide a stamped envelope addressed to the office.
- ❑ Read and sign the Standards of Behavior and Camp Counselor Code of Conduct forms.
- ❑ Return all materials to the Auglaize County Extension Office by **January 2, 2025.**
- ❑ You may submit original application directly to the office or by mail (not recommended as mail delivery may not been reliable) or you may **scan** your application and submit as an attachment by email to [miller.465@osu.edu](mailto:miller.465@osu.edu) ***Pictures of your application sent by email WILL NOT be accepted.***

4-H CAMP COUNSELOR APPLICATION

Name \_\_\_\_\_

Age (January 1) \_\_\_\_\_

Date of Birth \_\_\_\_\_ (00/00/0000)

Home Address \_\_\_\_\_  
(Street) (City) (State) (Zip)

Email \_\_\_\_\_ Home Phone \_\_\_\_\_

Cell Phone \_\_\_\_\_ Is texting an option? (circle) Yes No

*In case of injury or accident, notify:*

Name \_\_\_\_\_ Relationship \_\_\_\_\_ Phone \_\_\_\_\_

Why do you want to be a camp counselor? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What traits, skills, or special experiences do you have that would benefit you in this position? (Please include experiences working with children and youth.) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What skills or contributions will you add to the counselor team in making sure camp is successful? (such as First Aid, Babysitter's Course, Recreation, etc.) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What hobbies and/or special interests do you have that you would like to share? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please list 2 of your strengths. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Standards of Behavior for Employees and Volunteers Working in  
Youth Activities and Programs**

**This Standards of Behavior is an agreement accepted by employees/volunteers who work in a youth activity or program. The primary purpose of these standards is to promote the safety and wellbeing of all activity/program participants. Employees/volunteers are expected to function within these standards.**

**I will:**

- Accept supervision and support from professional staff while involved in the activity/program.
- Accept the responsibility to professionally represent the activity/program and The Ohio State University.
- Conduct myself in a courteous and respectful manner, exhibit good sportsmanship and be a positive role model for youth.
- Respect, adhere to and enforce the rules, policies and guidelines established by the activity or program and the university.
- Refrain from engaging in any criminal conduct.
- Comply with all applicable civil rights laws and policies, including and not limited to Ohio State equal opportunity and nondiscrimination policies.
- Perform duties in a responsible and timely manner as outlined in the position description.
- Report any child abuse or neglect in accordance with university policy.
- Self-disclose felony or misdemeanor convictions that occur within three days of pleading guilty or being convicted.
  - If I have been background checked and have had a break of service for less than 12 months, I will disclose any convictions that occurred during the break within three business days of commencement of participation in youth activities and programs. If the break in service is longer than 12 months, I must be background checked again.
- Not intentionally or purposefully place myself in a situation where I am alone with a youth unless authorized by the dean/vice president (or designee). Approved one-on-one interactions may only take place in open, well-illuminated spaces or rooms observable by other adults from the activity or program. If the dean/vice president (or designee) determines that meeting in this manner is not practicable and approves other arrangements, an exemption request form must be submitted following the exemption process outlined in the policy.
- Not, under any circumstances, physically, sexually, verbally, or emotionally abuse or fail to provide the basic necessities of care applicable to the activity/program, such as food or shelter, to participants.
- Endeavor to provide a safe and healthy experience for all participants.
- Report red-flag behaviors to the activity or program administrator of the youth activity or program that I am working or volunteering in. If I am an activity or program administrator, I will review red flag behaviors and work with those working and volunteering in my activity or program to correct these behaviors.
- Read and uphold the [Youth Privacy Principles](http://go.osu.edu/youthprivacy) located at [go.osu.edu/youthprivacy](http://go.osu.edu/youthprivacy)

I have read and understand the standards of behavior outlined above. I understand and agree that any act or omission on my part that contradicts any portion of these standards may be grounds for immediate suspension and/or termination of my employee/volunteer status with The Ohio State University.

_____ Employee/volunteer printed name	_____ Date
_____ Employee/volunteer signature	_____ Date
_____ Parent/guardian signature if employee/volunteer under 18	_____ Date

## 4-H CAMP COUNSELOR CODE OF CONDUCT

I, \_\_\_\_\_ agree that if selected, I will participate in the 4-H Camp Counselor Training Program. I understand that this is a training period and only once I complete my certification am I permitted to be a counselor at 4-H Camp.

I understand that I am taking on a different role at camp. I am applying to serve other, not to go purely for my own enjoyment. By signing below, I acknowledge that I have read and agree to abide by the above responsibilities if selected as a camp counselor. I understand and agree that I will be asked to call my parents/guardian immediately to pick me up if I conduct myself in an irresponsible manner, which includes being out of my cabin after hours and/or the possession or use of tobacco, alcohol, illegal drugs or fireworks.

I will be expected to:

- ✓ Attend the required number of counselor training sessions. I understand I will be dismissed if I am not able to complete the required training.
- ✓ Abide by the No Cell Phones at Camp Policy (note: unless otherwise authorized by Extension staff)
- ✓ Treat other peers with respect.
- ✓ Not bully fellow counselors or participate in roughhousing, horse-play, or hazing.
- ✓ Conduct myself as a positive role model and be responsible.
- ✓ Set a good example by not using profanity or telling off-color jokes, and stories.
- ✓ As a 4-H member, not have in my possession tobacco, alcohol or illegal drugs.
- ✓ Not have possession of harmful objects without specific authorization from the camp director, including but not limited to: knives of any kind (pocket, utility, etc.), lighters, matches, fireworks, explosives, firearms, weapons, etc.
- ✓ No pornography or other sexually oriented materials including nudity in visual or written materials including similar content.
- ✓ Be a responsible cabin counselor and ensure campers are provided guidance towards a safe and fun week.
- ✓ Ensure that all campers are supervised by counselor staff at all times. Be sure that all campers know that they must remain on the camp grounds at all times and are responsible for their behavior at all times.
  - Get to know each of the campers personally and by name.
  - Have all campers, including myself check in any of their medications with the nurse.
  - Make sure each camper uses personal hygiene.
  - Make sure that all of my campers are familiar with camp facilities and camp rules
  - See that all campers are involved in all activities. Make sure no one is excluded.
- ✓ Check for illness or injury, but don't make much of a "fuss" about minor things. Go with hurt or sick campers to the nurse no matter how minor the ailment.
- ✓ Follow guidelines for lights out, and cabin supervision. Be in my cabin with my campers at all times between the hours of "Lights Out" and "Rise and Shine."
- ✓ Never discipline a camper by ridicule or physical punishment; patience and understanding works best.
- ✓ Urge safety at all time. Take time to explain how and why to do something safely.
- ✓ Work as a team to plan, organize and conduct all camp activities.
- ✓ Be flexible with counseling and adult staff.
- ✓ Participate in camp promotion.
- ✓ Follow leadership of camping program through adult advisors/volunteers/staff.

I certify that the all the information being submitted is correct, and understand that failure to comply with these rules could result in probation, or loss of counseling position for the year.

Applicant's Signature \_\_\_\_\_

Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Parent/ Guardian Signature \_\_\_\_\_

Date \_\_\_\_/\_\_\_\_/\_\_\_\_

REFERENCE FORM

\_\_\_\_\_ is applying as a camp counselor at 4-H Camp this summer. The camp counselor selection committee would like your input about the qualities and ability to fulfill the responsibilities of a counselor. The information you include will not be shared with the applicant. Please complete this reference form based on *your* knowledge and/or observations. Thank you for your help.

1. Please mark how you would evaluate the applicant's qualities, using this scale:

	<b>Excellent</b>	<b>Good</b>	<b>Fair</b>	<b>Poor</b>	<b>Not Known</b>
Responsibility					
Communication skills					
Respect for others					
Dependability					
Enthusiasm					
Flexibility					
Patience					
Initiative					
Resourcefulness					
Ability to work with children (age 5-10)					
Ability to work with children (ages 11-14)					
Ability to work with other teens					
Ability to work with adults					

2. Please write any additional comments here:

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Relationship to Applicant: \_\_\_\_\_

Address: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

**Please return no later than January 15 – please DO NOT return to applicant**

OSU Extension, Auglaize County  
 Attn: Beth Miller  
 Address: 208 S. Blackhoof St., Wapakoneta OH 45895  
 FAX: 419-910-6051  
 E-mail: [miller.465@osu.edu](mailto:miller.465@osu.edu)

**Please submit in a sealed envelope. For questions contact OSU Extension Office. 419-910-6050.**

REFERENCE FORM

\_\_\_\_\_ is applying as a camp counselor at 4-H Camp this summer. The camp counselor selection committee would like your input about the qualities and ability to fulfill the responsibilities of a counselor. The information you include will not be shared with the applicant. Please complete this reference form based on *your* knowledge and/or observations. Thank you for your help.

1. Please mark how you would evaluate the applicant's qualities, using this scale:

	<b>Excellent</b>	<b>Good</b>	<b>Fair</b>	<b>Poor</b>	<b>Not Known</b>
Responsibility					
Communication skills					
Respect for others					
Dependability					
Enthusiasm					
Flexibility					
Patience					
Initiative					
Resourcefulness					
Ability to work with children (age 5-10)					
Ability to work with children (ages 11-14)					
Ability to work with other teens					
Ability to work with adults					

2. Please write any additional comments here:

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Relationship to Applicant: \_\_\_\_\_

Address: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

**Please return no later than January 15 – please DO NOT return to applicant**

OSU Extension, Auglaize County  
 Attn: Beth Miller  
 Address: 208 S. Blackhoof St., Wapakoneta OH 45895  
 FAX: 419-910-6051  
 E-mail: [miller.465@osu.edu](mailto:miller.465@osu.edu)

***Please submit in a sealed envelope. For questions contact OSU Extension Office. 419-910-6050.***