



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:

## BEARKAT CAMP COUNSELOR APPLICATION

Date _____ Name _____ Email address _____ <b><u>Permanent Address</u></b> Street _____ City _____ State _____ Zip _____ Phone _____ Cell _____ <b><u>Current Address</u></b> Street _____ City _____ State _____ Zip _____ Phone _____	SAM ID _____ Birthdate _____ age _____ Gender: <input type="checkbox"/> Female <input type="checkbox"/> Male Major _____ Minor _____ I am enrolled as a college: <input type="checkbox"/> Freshman <input type="checkbox"/> Sophomore <input type="checkbox"/> Junior <input type="checkbox"/> Senior <input type="checkbox"/> Graduate Student (Expected) Graduation Date _____ Please circle your choice of session(s): Session 1 Session 2 Session 3 Transfer
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Please describe your involvement at SHSU. (Including current organizations you belong to and activities you participate in on and off campus.)

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

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What makes you proud to be a Bearkat?

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

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Anything else you want us to know?

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

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.