

## **Counselor Application**

Name:		Tufts S	itudent ID:	
Campus Address:				
Telephone:				
Email:				
Permanent Address:				
Telephone:				
Undergraduate	Graduate Student/Program	n:	Expected Date of Graduation:	
Are you eligible for Federal	Work Study?yes	sno		
Please answer the following questions thoroughly. (Feel free to use more than the space provided.)				
1. Please describe your p	orevious experience with ch	nildren.		
2. Have you worked in a camp setting in the past? In what capacity? What did you like most about it? What was challenging?				
3. What are your special interests? What might you like to share with children?				
4. What do you hope chi	ldren will gain from your wo	rk together?		

5. Please write down the name and email address of one reference (a previous supervisor or employer).