

LAKE FOREST

PARKS AND



RECREATION

CIT APPLICATION

LAKE FOREST RECREATION DEPARTMENT
400 HASTINGS ROAD
LAKE FOREST, ILLINOIS 60045
(847) 234-6700

Please print legibly or type all answers.

Personal Info

Name: _____

Address: _____

Phone #: _____

Email address: _____

Grade: _____ Age: _____

Birthday: _____ Shirt Size: _____

Have you been a CIT in the past? Yes No If yes, Camp:

Program 1st Choice: _____ Day & Time: _____

Why are you applying for the CIT Program?

List any experience that you have had working with children.

Why do you feel that you are qualified for this type of work experience?

List any hobbies, school sports, clubs or special honors.

List any conflicts that you will have during the summer which may interfere with your work experience.

References: List three persons who are not related to you who can comment on your education, social and or work experience

NAME	ADDRESS	OCCUPATION	PHONE
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____

I certify that I have personally completed this application and that the information is complete and correct to the best of my ability. I understand any falsification may be grounds for disqualification or dismissal. Application deadline is April 12, 2025 at 4:30 p.m.

Signature of Applicant

Date