



# CMP JUNIOR RIFLE CAMPS CAMP COUNSELOR APPLICATION FORM

To apply for a position as a CMP Junior Rifle Camp Counselor during the summer of 2010, please complete this form and return it to: Sommer Wood, CMP Junior Rifle Camps, P. O. Box 576, Port Clinton, Ohio 43452. Forms may be faxed to Sommer Wood at: 419-635-2573. Email questions to [swood@odcmp.com](mailto:swood@odcmp.com). **Applications must be received by 19 March 2010.** **Successful applicants will be notified by 16 April 2010.**

<b>Name</b>	<b>Email Address</b>
<b>Home Address</b>	<b>School Address</b>
<b>Phone</b> (at school or cell)	<b>Phone</b> (home)
<b>University</b>	<b>Year in college:</b>
<b>ACADEMIC EXPERIENCE</b>  Academic major: _____ Overall GPA: _____  Please describe your career goals after college.	

**SHOOTING EXPERIENCE**

**Junior, Collegiate, National and International Rifle Experience**— describe your shooting experiences, including years of experience, training received, club or team memberships, and most important accomplishments.

Please describe your shooting and/or coaching goals after college.

Please list your most recent NCAA qualifier or NCAA Championship scores:

Smallbore \_\_\_\_\_ Air Rifle \_\_\_\_\_ Year \_\_\_\_\_

Please list your most recent season average scores:

Smallbore \_\_\_\_\_ Air Rifle \_\_\_\_\_ Year \_\_\_\_\_

**CAMP AND COUNSELOR EXPERIENCE**

Have you been a Counselor at a previous CMP Camp? \_\_\_\_\_yes \_\_\_\_\_no

What years? \_\_\_\_\_

**Rifle Camps and Clinics**— describe any experiences you have had attending or working at any junior rifle camps or clinics in previous years.

**Camp/Youth Leadership Experience**—describe any experiences you have had as a camp counselor or youth organization leader in activities other than shooting.

**Camp Related Interest**---List any additional skills or interests that can be applied at camp: Computer Skills, Gunsmithing, Exercise Training, MegaLink operation, video editing etc.

**REFERENCES**

Please provide the name, address, phone number, and email of your college coach and one other reference.

Will you be available to work as a Counselor from 24 May thru 30 July 2010? \_\_\_\_yes \_\_\_\_ no

(Provision will be made for those competing in the USAS National Championships.)

I plan on competing in the USAS National Championships \_\_\_\_yes \_\_\_\_ no

**Background Check:** I understand and approve of the Civilian Marksmanship Program obtaining information about me for security and employment purposes. I understand that this information may include criminal history records that might exist within the past seven years and/or consumer or investigative reports. I understand that the consumer report is a record from a reporting agency, which reflects credit standing, residence and personal habits, character, financial reputation and life-style. I understand that an investigative consumer report contains information on character, residency, life-style and personal characteristics or reputation.

I understand that this information is to be solely for the use of the Civilian Marksmanship Program for security and employment considerations. I do NOT approve of it being released to anyone without my written certification.

I acknowledge that I have been clearly notified of the above information in compliance with the Fair Credit Reporting Act.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Witness signature: \_\_\_\_\_

Applicant Social Security Number: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Place of Birth: \_\_\_\_\_

Driver's License: State \_\_\_\_\_ Number: \_\_\_\_\_