



**Rockland Recreation
Jr. Counselor Program
Summer 2024**

This program is for individuals too old for our Hartsuff Park program and is a **volunteer** position. This program is suited for youth ages 14-16.

Through this program, individuals will be given the opportunity to work closely with our Hartsuff program staff learning the logistics of the program such as drop-off, equipment set up and take down, arts & crafts as well as games. In addition, they will gain leadership skills as well as be taught how to work with children. The Jr. Counselor will have the opportunity to work with each of our counselors as well as spend time with our lifeguards, so they get a feel for what each position entails. The program is very limited we allow only 2-4 Jr. counselors on staff per week. A maximum of two weeks is allowed per applicant. (Once all the applicants have weeks assigned to them then you can register for additional weeks) This program is Monday – Thursday 8:45am – 3:15pm or 8:45 – 12:00pm.

Please note that there is a \$30 registration fee for the program. This is to pay for shirts. Please have your parents or guardian contact the office and we will register you online for the program. This will provide us with all the appropriate contact information. At that time, you can pay online or can send us a check made out to the Town of Rockland.

Please circle the two weeks below that you would like to attend. Once we have all the applications in, we will evaluate if we can accommodate more than two weeks.

Monday-Thursday only

Circle Two Weeks

Week 1 Not Available

Week 5 July 22nd – July 25th

Week 2 June 24th – June 27th

Week 6 July 29 – August 1st

Week 3 July 8th - July 11th

Week 7 August 5th – August 8th

Week 4 July 15th – July 18th

Week 8 August 12th – August 15th

Participants will attend mandatory training to focus on leadership skills, supervising children, team building, and other important skills that will aid them in working at the program site. This training will be May 18th & May 19th from 9:00-2:00. We will provide lunch.

Application and Selection Procedure:

- ***Applications, reference sheet, and two letters of recommendations must be received at the Rockland Recreation Office (394 Union St.) by June 1st. Please note the letters of recommendation must not be from a family member.***
- ***Applicant may be contacted for an interview by the Recreation Director or Staff Member***
- ***Addition training may be required and provided by the recreation office.***

Rockland Recreation Jr. Counselor Application

Last Name

First Name

Home Address:

Home Phone

Cell Phone

School

Grade completed (June 2020)

Email Address

Position applying for: Please only choose two weeks. (If more are available, we will let you know)

Hartsuff Park

Week: 1 2 3 4 5 6 7 8

Activities: (List 3 activities in order of their importance to you.)

1. _____

2. _____

3. _____

Experience with children or Parks and Recreation:

References: List three individuals familiar with your leadership, character, and work habits. Name Address
Phone

1. _____

2. _____

3. _____

I certify that all statements answered, including available work dates, are true and accurate. If chosen, I will work the full session to which I am assigned. In fairness to other applicants, if I should become unavailable for the summer, I will withdraw this application immediately.

Signature

Date

Return to Rockland Recreation 394 Union St. Rockland, MA 02370

**Rockland Recreation
Jr. Counselor Program
Personal Reference**

Applicant's _____
Last First Middle Initial

Rockland Recreation administers and operates summer recreation programs for children ages 3-12 years old. The program is staffed by recreation professionals, teachers, coaches, and high school and college students with strong backgrounds in working with children. In addition, limited positions as Jr. Counselors are available to students aged 14-15 years old. The Jr. Counselors are expected to assist the Hartsuff Park Staff in providing instruction to program participants.

Rockland Recreation greatly appreciates your recommendation of this applicant's ability to successfully perform the duties as a Jr. Counselor.

How long have you known the applicant? _____

In what capacity have you known the applicant? _____

Jr. Counselors are viewed by program participants as role models. Children enjoy interacting both socially and athletically with their Jr. Counselors. Please assess the applicant's potential in this environment:

Please rate the applicant in the following areas (please check the box that applies):

	Unable to Judge	Below Average	Average	Above Average
Energy & Initiative				
Independence				
Originality/ Creativity				
Leadership				
Self-Confidence				
Concern for Others				
Reaction to Criticism				
Reaction to Setbacks				
Sense of Responsibility				
Instructional Skills				
Reliability				
Ability to Work and Relate to Children				
Commitment to a Job or a Task				

[OVER]

Please feel free to make any additional statements here:

Name _____

Address _____
Street City State Zip

Signature _____

Date _____

Telephone (_____) _____

Email Address _____

Please return this form to The Rockland Recreation Department.

**Rockland Recreation
394 Union St.
Rockland, MA 02370**

**Phone: (781) 871-1730
E-mail: rocklandrec@rockland-ma.gov**

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Jr. Counselor Program
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Commitment to a Job or a Task				

[OVER]

Please feel free to make any additional statements here:

Name _____

Address _____
Street City State Zip

Signature _____

Date _____

Telephone (_____) _____

Email Address _____

Please return this form to the Rockland Recreation Department.

**Rockland Recreation
394 Union St.
Rockland, MA 02370**

**Phone: (781) 871-1730
E-mail: rocklandrec@rockland-ma.gov**

ROCKLAND RECREATION

Guardian Consent, Release from Liability, and Indemnity Agreement

I hereby agree to comply with the rules and regulations of the Tot Enrichment Program regarding fees, attendance, health, parking, clothing, and other items specified in the Policy issued by Rockland Recreation each year. I am aware of the scheduled school holidays. Further, I agree to notify the Rockland Recreation Office in writing two weeks in advance of withdrawal, should such an event occur, or pay the difference.

I/We _____, the parent(s)/guardian(s) of the minor _____ (The "registrant"), give permission for the registrant to participate in programs sponsored by Rockland Recreation. I/We understand that the Rockland Recreation will provide supervision for the safety and wellbeing of the registrant, and I/We agree that the registrant will abide by the rules of the Rockland Recreation and the Town of Rockland and follow the instructions of all supervisory staff, including sponsors, employees, volunteers, and other personnel.

I/We recognize the risk of injury or accident related to the activity. I/We also acknowledge that the registrant may not participate in the activity unless I/We waive claims, which I/We may have arising from the registrant's participation in the activity. I/We agree to forever RELEASE the Town of Rockland, a municipal corporation of the Commonwealth of Massachusetts, and all their employees, officers, agents, board members, volunteers and any and all individuals and organizations assisting or participating in voluntary athletic or recreation programs of the Town of Rockland ("the Releasees") from any and all claims, actions, rights of action and causes of action, damages, costs, loss of services, expenses, compensation and attorneys' fees that may have arisen in the past, or may arise in the future, directly or indirectly, from known and unknown personal injuries to my child or property damage resulting from my child's participation in the Town of Rockland's voluntary athletic or recreation programs which I/We may now or hereafter have as the guardian of said minor child and which said minor child has or hereafter may acquire, either before or after reaching majority.

I/We also promise to INDEMNIFY, REIMBURSE, DEFEND, and HOLD HARMLESS the Releasees against any and all legal claims and proceedings of any description that may have been asserted in the past, or may be asserted in the future, directly or indirectly, including damages, costs and attorneys' fees, arising from personal injuries to my child or property damage resulting from my child's participation in the Town of Rockland's voluntary athletic or recreation programs.

I/We further affirm that I/We have read this Guardian Consent, Release from Liability, and Indemnity Agreement, and that I/We understand the contents of this Agreement. I/We understand that my child's participation in these programs is voluntary and that my child and I/We are free to choose not to participate in said programs. By signing this Agreement, I/We affirm that I/We have decided to allow my child to participate in the Town of Rockland Recreation athletic or recreation programs with full knowledge that the Releasees will not be liable to anyone for personal injury and property damage my child or I/We may suffer in voluntary Town of Rockland Recreation athletic or recreation programs. Permission is granted for the use of photographs taken in promotional material which may include but is not limited to flyers, notices, and bulletin boards.

Signed:

Guardian(s) of Participant

Guardian(s) of Participant

Date

Name of Child