

CAMP SETEBAID®

A SETEBAID SERVICES,® INC. PROGRAM

CIT APPLICATION GUIDELINES AND PROGRAM EXPECTATIONS

We thank you for your interest in the Counselor-In-Training (CIT) Program. Those applying for the CIT Program should have an interest in becoming a Counselor; the program will be specifically geared toward diabetes resident camp counseling skill development. There is a competitive selection process – a limited number of CIT I's will be selected. If you decide you are more interested in the camper aspect of diabetes camp, we encourage you to register for Camp Setebaid at Mount Luther.

What is the CIT Program?

The CIT program is, as its name suggests, a program for teens (with or without T1D) that develops skills to be a residential camp Counselor. Specifically, the program will sharpen mandatory skills including Camper Health & Safety, Counseling Techniques, Child Psychology, and Diabetes Management. In addition to the mandatory skills which must be mastered for successful completion of the program, there are several other skills which may be included in the program. These skills may include, but are not limited to, Outdoor Living Skills, Water Safety, Arts & Crafts, Camp Songs, Sports & Games for Groups, Nature, Map & Compass Skills, and Camp Ceremonies Planning Skills.

The CIT Program will also develop Leadership Skills in the trainees. These leadership skills will be useful while working with campers; the leadership skills will also be useful in school with your peers, in college with peers, and in work situations as you move into the working world.

What Should Be Your Goals and Objectives for the CIT Program?

Your objective for the CIT Program should be to advance through the progressive program over a period of different levels, including the CIT I and the CIT II levels. Progression through the levels is determined by your experience and time in the program and by your successful mastery of skill levels.

How do I progress in the CIT Program?

To successfully complete the CIT I level, you will be required to have one week of training in the program with positive recommendations from the CIT training staff. You must reach proficiency in the mandatory skills listed above, leadership responsibilities, and three of the other skills. In addition, you will need to demonstrate an understanding and appreciation of the diabetes camping program. We hope you will realize learning is a continuous process which never ends; and most of all, we hope you enjoy your time in the program and have fun!

To successfully complete the CIT II level, you will need to meet all of the CIT I level requirements and master four additional skills. Those who are completing the Counselor in Training Program will be expected to have your counseling skills and all skills mastered to date reviewed and evaluated. You will work on your teaching skills and strengthen your leadership skills while gaining practical experience working as an apprentice counselor with your supervisor.

What are this year's CIT Program Dates and where is it held?

Camp Setebaid® CIT Program: July 13-19, 2025 (at Camp Setebaid® at Mount Luther, Mifflinburg, PA.)

Am I eligible for the CIT Program?

The CIT Program is a residential program which requires everyone on-site to live on-site for the entire program with your fellow CITs and Counselors. *(All camp policies must be followed, including everyone on-site must be up-to-date on all US CDC Recommended vaccinations except the Influenza or COVID-19 vaccination; Influenza and COVID-19 vaccines are highly recommended, but NOT required.)* Living on-site is an

Diabetes Education Services and Social Support Programs

important part of the program because many activities and duties occur early in the morning and late at night. To be eligible for the program you must be at least 16 (but do not turn 18) years of age by the start of the Camp Setebaid® CIT Program.

When are CITs selected, what is the cost of the CIT Training Program, and when do I have to pay?

The cost for Camp Setebaid's CIT weeklong training program, which includes food, lodging, and training materials, is based upon the attached Tier Level. *If selected, you will be notified by April 1, 2025. If you accept the position, payment for CIT I's will be due as follows: \$500 non-refundable deposit payment with Commitment Form immediately upon acceptance. Additional payments can be arranged on a monthly basis depending upon the Payment Tier you select.*

A note about payments: If payment is not received by due dates, you may forfeit your space in the program to the next eligible applicant; if we make arrangements to hold the space for you after June 15th without payment, there will be a late fee of \$50; finance charges may accrue if the payment is more than 30 days late. All fees must be paid in-full prior to camp to participate in the program. **This year, limited financial assistance is available for the CIT Program. There is a separate Financial Assistance Application, which must be filled out and processed before March 15th, 2025.** In order to apply for Financial Assistance, ***your parents/guardians must submit a signed 2024 IRS Form 1040 as part of the Financial Assistance Application.***

What are the expectations of me while I'm in the CIT Program?

The expectation of all candidates completing applications is you will be available for the entire CIT Program for which you are applying. And, if selected to participate in the program, you are expected to perform to the best of your ability, participate whole-heartedly in the program and in all camp activities. All CITs will be expected to follow all camp rules and policies. CITs will be expected to show respect for the staff and follow the medical staff's instructions for the treatment of your diabetes, as well as any other medical condition you may have.

The Application and How CITs are Selected

You are invited to complete the application for a CIT position if you agree to meet the expectations as described above. **All applications should be handwritten by the applicant. They should be returned to: Setebaid Services,® Inc., P.O. Box 196, Winfield, PA 17889-0196 by February 14, 2025 at Noon or scanned and emailed to info@setebaidservices.org.**

Please note: CIT Applicants should complete the entire application by **themselves**. If at any point during the selection process or the CIT program we learn the CIT was untruthful in completing the application themselves, we may immediately discharge the CIT.

Once the applications are received, your name, address, and phone number may be removed for the application to be scored without reviewers knowing the applicant. Those applications with the highest scores will qualify the applicant for an interview.

Following the interviews of the top candidates, positions will be offered to those selected by the CIT Selection Committee. The CIT Director will contact those selected and offer them first choice for the CIT Program. After all positions are filled, all other applicants will be informed the positions were filled by the CIT Director. All applicants should receive notification before June 15. These guidelines for the application are an integral part of the application process. By signing the application, you are stating you understand the expectations listed above and you agree to meet all expectations of the program to the best of your ability.

2025 CIT I Fee

Setebaid Services is a not-for-profit organization which relies on community support to provide programs like the CIT II Program. As we all face inflation, the organization's costs have increased across the board, including the services we purchase for the CIT Program (e.g. insurance, training fees, lodging, meals, snacks, medical supplies, etc.).

Preliminary budgets show the CIT II Program will cost the organization over \$4,225 per CIT II for their one-week Training Program. Like many diabetes camps across the United States, Setebaid Services has been highly subsidizing everyone who attends our programs. However, to be completely transparent, we are continuing a tiered fee structure in 2025. The Setebaid Campership Fund is supported by caring donors, foundations, and community members.

You are free to select the Tier which you can afford. Tier IV is the only tier which requires an application for additional funding from the Setebaid Campership Fund. If you would like to apply for Tier IV, please contact our office for an application by email (info@setebaidservices.org) or phone (570-524-9090). Tiers I, II, or III are open for you to select the option which fits into your family's budget.

This tiered pricing system is an "honor system" designed to make camp accessible to everyone, regardless of their family's income level. We ask you, as camp role models, to please select the tier your family can afford. By doing so, it leave more funding in the campership fund for families less financially fortunate than your family. Everyone at camp receives the same great diabetes camp experience regardless of what they pay for camp.

TIER	DESCRIPTION	FEE
Tier I:	A slightly subsidized fee	\$3,650
Tier II:	A subsidized fee	\$2,575
Tier III:	A highly subsidized fee	\$1,050
Tier IV:	Income-based Sliding Fee Scale or Financial Assistance	<i>As determined by Application</i>

Tier IV, the sliding-scale fee or financial assistance programs require an application to assure our donors we are appropriate stewards of their donations. The Tier IV applications were developed to assure our donors their gifts are shared equitably with families most in need.

CITs who are selected will be given the opportunity to select the Fee Tier which is appropriate given the family situation. Any subsidies come from the Setebaid Campership Fund; we ask you to help us raise the necessary funds to support our future campers and CITs.



CAMP SETEBAID®
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WINFIELD, PA 17889-0196
(570) 524-9090
FAX: (570) 523-0769

COUNSELOR-IN-TRAINING APPLICATION

This application may be returned to Camp Setebaid by mailing to the address on the left, or via email attachment to info@setebaidservices.org by the due date below.

Must Be Handwritten By The Counselor-In-Training Applicant

Applicant: *Please legibly handwrite your answers when completing the following application. Return the application to the Camp Setebaid office (by mail or email) no later than Noon, February 14th, 2025.*

Applicant's Name: _____ Preferred Pronouns: _____

Street Address: _____

City: _____ **State:** _____ **Zip code:** _____

Phone number*: _____ **Date of Birth:** _____

Applicant's Email*: _____

**Not the parents' phone or email...this should be the applicant's phone and email.*

Program Dates:

*Camp Setebaid at
Mount Luther*

July 13-19, 2025.

*Cost: See Fee
Tiers*

1. Have you ever been to a diabetes camping program before?
If yes, where? How many years?
2. Do you have any experience dealing with children? (i.e. babysitting, coaching) In what capacity?
3. Describe the management of your diabetes.
4. How would you teach young children about good diabetes management?
5. Describe your personal goals you hope to accomplish through the CIT Program.

Diabetes Education Services and Social Support Programs

P.O. Box 196 • Winfield, PA 17889-0196 • (570) 524-9090 • Fax: (570) 523-0769 • www.setebaidservices.org

- 6. What type of school / community activities are you involved in? Please explain your role in these activities.

- 7. Are you employed? If yes, what is your position/role at your employment?

- 8. Why do you want to become a CIT?

Please list three references. Reference forms must be completed and returned from 2 of your references listed below. A written letter is required from your third reference listed below.

Name (#1)	Name (#2)	Name (#3)
Address	Address	Address
City / State / Zip Code	City / State / Zip Code	City / State / Zip Code
Phone Number	Phone Number	Phone Number

I, the applicant listed above, and my legal guardian signing below, hereby give Setebaid Services,® Inc., its staff, and volunteer staff the right to verify the information listed above; we authorize them to contact those listed as references. I, the applicant, have read the CIT Application Guidelines and Program Expectations, and understand what is expected of me and agree to the terms of the program if I am selected; I have completed this application myself and have answered all questions on this application completely, truthfully, and to the best of my ability. I am available for the entire CIT Program.

Applicant: _____ **Date:** _____
Signature Month Day Year

Parent or Guardian: _____ **Date:** _____
Signature Month Day Year



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COUNSELOR-IN-TRAINING REFERENCE FORM

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To Be Completed By The Counselor-In-Training Applicant

Applicant's Name: _____

Position Applied For: **Counselor-In-Training**

Camp Setebaid is a residential camp for children and teens aged 8-17, with diabetes. The person listed above has applied for a **Counselor-In-Training** position. Please help us by completing this form for the applicant listed above.

The applicant, by signing below, releases you from any liability for completing this reference request truthfully.

X _____
Applicant's Signature

Date: _____

To Be Completed By The Reference

Reference: *(Please print neatly or type.)*

Name: _____

May we contact you for additional information? Yes No

Address: _____

Phone: _____

Email: _____

What is your relation to the applicant? _____

How long have you known the applicant? _____

If you employed the applicant, is he/she eligible for re-hire? Yes No Not Applicable

Please rate the applicant in the following areas by selecting the most appropriate:

- | | | | | | |
|----------------|------------------------------------|------------------------------------|-------------------------------|---------------------------------------|--|
| Judgment | <input type="checkbox"/> Excellent | <input type="checkbox"/> Very Good | <input type="checkbox"/> Good | <input type="checkbox"/> Satisfactory | <input type="checkbox"/> Needs Improvement |
| Creativity | <input type="checkbox"/> Excellent | <input type="checkbox"/> Very Good | <input type="checkbox"/> Good | <input type="checkbox"/> Satisfactory | <input type="checkbox"/> Needs Improvement |
| Role Model | <input type="checkbox"/> Excellent | <input type="checkbox"/> Very Good | <input type="checkbox"/> Good | <input type="checkbox"/> Satisfactory | <input type="checkbox"/> Needs Improvement |
| Enthusiasm | <input type="checkbox"/> Excellent | <input type="checkbox"/> Very Good | <input type="checkbox"/> Good | <input type="checkbox"/> Satisfactory | <input type="checkbox"/> Needs Improvement |
| Leadership | <input type="checkbox"/> Excellent | <input type="checkbox"/> Very Good | <input type="checkbox"/> Good | <input type="checkbox"/> Satisfactory | <input type="checkbox"/> Needs Improvement |
| Initiative | <input type="checkbox"/> Excellent | <input type="checkbox"/> Very Good | <input type="checkbox"/> Good | <input type="checkbox"/> Satisfactory | <input type="checkbox"/> Needs Improvement |
| Integrity | <input type="checkbox"/> Excellent | <input type="checkbox"/> Very Good | <input type="checkbox"/> Good | <input type="checkbox"/> Satisfactory | <input type="checkbox"/> Needs Improvement |
| Responsibility | <input type="checkbox"/> Excellent | <input type="checkbox"/> Very Good | <input type="checkbox"/> Good | <input type="checkbox"/> Satisfactory | <input type="checkbox"/> Needs Improvement |
| Flexibility | <input type="checkbox"/> Excellent | <input type="checkbox"/> Very Good | <input type="checkbox"/> Good | <input type="checkbox"/> Satisfactory | <input type="checkbox"/> Needs Improvement |
| Awareness | <input type="checkbox"/> Excellent | <input type="checkbox"/> Very Good | <input type="checkbox"/> Good | <input type="checkbox"/> Satisfactory | <input type="checkbox"/> Needs Improvement |

Do you think the applicant is appropriate for the position listed above? Yes No

Do you recommend the applicant for the position listed above? Yes No

Do you believe the applicant is making the decision to apply on their own behalf? Yes No

To the best of your knowledge, is this applicant prohibited from working with children? No Yes

I am the reference listed above and have answered these questions truthfully and to the best of my knowledge and ability.

Signature: X _____

Date: _____



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Do you recommend the applicant for the position listed above? Yes No

Do you believe the applicant is making the decision to apply on their own behalf? Yes No

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I am the reference listed above and have answered these questions truthfully and to the best of my knowledge and ability.

Signature: X _____

Date: _____