



**HERTKO FUTURE LEADER APPLICATION**  
**Counselor in Training (CIT)**  
**Must be 17 yrs. of age**

Name \_\_\_\_\_ Home # \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Cell # \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_  
Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_  
Email \_\_\_\_\_ Birthdate \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Age \_\_\_\_\_ (As of June 1st)  
Current grade in school \_\_\_\_\_ Male \_\_\_\_\_ Female \_\_\_\_\_ Date of Application \_\_\_\_/\_\_\_\_/20\_\_\_\_  
Have you participated in Camp Hertko Hollow's LIT program? Yes \_\_\_ No \_\_\_  
Do you have diabetes? Yes \_\_\_\_\_ NO \_\_\_\_\_ Type 1 or 2? \_\_\_\_\_ At what age were you diagnosed? \_\_\_\_\_

**Statement of Understanding:**

In applying for the Hertko Future Leader program as a CIT, I am aware that my status during the week at CHH is camper. My role at camp will allow me to stay in a cabin during kid's week and shadow CHH camp counselors to comprehend and experience first-hand experience in my future role as a diabetes camp counselor at CHH when eligible. I will focus on the camper's in my cabin with the guidance of the CHH camp counselors and HFL coordinator. My goal will be to demonstrate my desire to help kids with diabetes and use my leadership skills to impact those around me in a positive way.

Signature of applicant \_\_\_\_\_

Please thoroughly answer the following questions on a separate piece of paper(s) and return with this application.

**ESSAY/Questions**

1. How do you think being a CIT is different from your previous years as a camper?
2. What impact do you hope to have on the campers in your cabin as a CIT?
3. What leadership skills you have developed over the years that will help you stand out as a CIT?
4. What are your future plans in helping kids with diabetes?

**Activities/Organizations/Club Responsibilities**

Please list all that apply; date and length of time, and what your role or duty was with each organization.

**References**

Please have two people write a reference letter to support your application. References could be given by any one of these persons who know you: physician, school nurse, diabetes educator, supervisor at work, educational personal, or personal source such as a volunteer organization leader or a coach (not a relative).

**Mail or FAX the information back to:**

Camp Hertko Hollow, Inc.  
Hertko Future Leader Director  
4200 University Ave STE #320  
West Des Moines, IA 50266  
FAX to 515-288-2531

Questions? Toll Free: 855-502-8500 or 515-471-8547