

Submit by email to [KIDSU@unr.edu](mailto:KIDSU@unr.edu)



# KIDS University Junior Counselor Application

PLEASE TYPE OR PRINT CLEARLY

## PERSONAL

Last Name: \_\_\_\_\_ First: \_\_\_\_\_ MI: \_\_\_\_\_

Local Address: \_\_\_\_\_ Apt. #: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Local Phone: \_\_\_\_\_ E-mail Address: \_\_\_\_\_

In Case of Emergency Contact: \_\_\_\_\_

Their Day Phone: \_\_\_\_\_ Evening Phone: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_

## ACADEMIC

Academic Year in the fall:  FR  SO  JR  SR Cumulative GPA: \_\_\_\_\_

School you will attend in the fall: \_\_\_\_\_

List KIDS U classes attended: \_\_\_\_\_

Classes interested in junior counseling: \_\_\_\_\_

T-shirt size:  S  M  L  XL  XXL

## CAMP SCHEDULE: June 17-July 26, 2024

Total work hours per week (**MUST** be at least 15 hours per week M-F during camp): \_\_\_\_\_

Please mark the boxes for the times you are **NOT** able to work.

Time	7 a.m.	8 a.m.	9 a.m.	10 a.m.	11 a.m.	Noon	1 p.m.	2 p.m.	3 p.m.	4 p.m.	5 p.m.	6 p.m.
MON.												
TUES.												
WED.												
THURS.												
FRI.												

Please check the boxes for weeks you are **NOT** able to work.

- Week 1 June 17-21
- Week 2 June 24-28
- Week 3 July 1-3, 5
- Week 4 July 8-12
- Week 5 July 15-19
- Week 6 July 22-26

## EXPERIENCE

On a separate piece of paper, please type answers to the following questions and submit them with this application.

1. What do you know about KIDS University or this job?
2. What experience do you have working with kids of any age?
3. Tell us why you want to volunteer for KIDS University?

## PREVIOUS EMPLOYMENT

(Please list places of employment beginning with current or most recent positions)

Company: \_\_\_\_\_ Employed from: \_\_\_\_\_ To: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Positions and Duties: \_\_\_\_\_  
\_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Company: \_\_\_\_\_ Employed from: \_\_\_\_\_ To: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Positions and Duties: \_\_\_\_\_  
\_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

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Reference Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Relationship: \_\_\_\_\_ (No family members.)

Reference Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Relationship: \_\_\_\_\_ (No family members.)

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I certify all of the information that I have provided on this application is true and complete to the best of my knowledge.

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

The University of Nevada actively subscribes to a policy of equal opportunity and will not discriminate against any employee or applicant because of race, sexual orientation, age, sex, physical or mental handicap, marital status, religion, national origin or political affiliation. In addition, the University of Nevada is required by Title IX of the Education Amendments of 1972 not to discriminate on the basis of sex in employment. Sexual harassment of students, employees and users of the university community is unacceptable and prohibited. 1/17/01

**Applicant age requirements:** Junior Counselors must be at least 15 years old and entering 9th, 10th, 11th or 12th grade in the fall.