



"Be The Best You" Teen Girls Camp 2011  
Counselor Application  
University of Utah  
July 12-17, 2011  
July 8-10 Counselor Training

"Be The Best You" Girls Camp 2010 held at the University of Utah for girls 12-18 is looking for enthusiastic, fun and caring LDS counselors. The mission of the Camp is to help each girl build her self-esteem, know she is a daughter of God and to strengthen her testimony of Jesus Christ. It is a fun, inspirational and life-changing program dedicated to teaching the Young Women values of the Church of Jesus Christ of Latter-day Saints. Each counselor is assigned a group of 10-12 girls for the week.

If you have completed at least one year of college, are not married, and would like to apply for a counselor position, please **complete the application and return it with a photograph of yourself** to the address below. Counselors are paid \$400 for the week. A required counselor training session will be held the weekend prior to camp at the U of U campus. You need to arrive on campus Friday, July 8 by 12:00 pm and will be finished on Saturday, July 16 by 12:00 pm.

You may email the information requested below with a picture to [becky@bethebestyoucamp.com](mailto:becky@bethebestyoucamp.com) or send the completed application by mail. The applications are due by March 1. If you have any questions, please call me at (800) 989-3309. You may visit our website for more information. <http://www.bethebestyoucamp.com>

Mailing Address

Be The Best You Camp  
10 Badger Court  
Novato, CA 94949  
800 989-3309

Name:

Age:

T-shirt Size:

College attending:

Current Address:

Current Phone

Permanent Address

Permanent Phone

Email Address:

1. As a counselor for the “Be The Best You” Girls Camp, you will teach your girls nightly lessons or devotionals on specific subjects that would help them to better themselves and truly become their best self. The devotional topics will include unconditional love, morality, self-worth, honesty/integrity, and gratitude. Please select one of these topics and present your lesson plan.

2. Why do you want to be a counselor for the “Be The Best You” Girls Camp? What talents, experience, and qualities do you have that you feel would help you to be a good counselor?

3. What do you feel is a challenge that the youth of the world are facing today? And what is something you could teach your girls about overcoming this obstacle?

AUTHORIZATION TO BE USED FOR INSURANCE PURPOSES FOR  
**BE THE BEST YOU CAMP ONLY**  
July 11 - 16, 1011

**AUTHORIZATION TO RELEASE INFORMATION**

I, \_\_\_\_\_  
                    First Name                                      Middle Name                                      Last Name

Permanent Address \_\_\_\_\_

\_\_\_\_\_ County \_\_\_\_\_

Date of Birth \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Social Security Number    \_\_\_\_\_    \_\_\_\_\_    \_\_\_\_\_

I \_\_\_\_\_ do hereby authorize verification of all information in my employment application from all sources of employment, education, motor vehicle criminal history, and worker's compensation records in accordance with ADA, labor and wage records, etc. or any part thereof, and authorize any duly authorized agent of **IntelliCorp Records, Inc** to obtain, whether the said records are public or private, and including those which may be deemed to be privileged or confidential in nature and I release all persons from liability on account of such disclosures. Information appearing on this Authorization will be used exclusively by **IntelliCorp Records, Inc** for identification purposes and for the release of information, which will be considered in determining any suitability for employment.

I authorize any party or agency contacted by **IntelliCorp Records, Inc** to furnish the above-mentioned information. This authorization is valid only during the course of my employment by *Be The Best You Camp* to the extent permitted by law.

I have the right to make a request to **IntelliCorp Records, Inc**, upon proper identification, to request the nature and substance of all information in its files on me at the time of my request, including sources of information, and the recipients of any reports on me which **IntelliCorp Records, Inc** has previously furnished within the two year period preceding my request.

Printed Name \_\_\_\_\_

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