

# PBHA's Summer Urban Program 2004 Senior Counselor Packet

what we do . job description . application

Applications due  
(postmarked by):  
**Friday Feb. 20<sup>th</sup>, 2004**

Questions? Email **Chris** at [vena@fas.harvard.edu](mailto:vena@fas.harvard.edu) or call him at 617.495.5526

*Check out our webpage with more complete program descriptions at*  
[www.pbha.org/pbha/sup/](http://www.pbha.org/pbha/sup/)

## *What are the Summer Urban Programs?*

Each summer, **approximately 150 college students** live and work in various communities in Boston and Cambridge. Serving over 800 youth ages 6 to 13, the summer programs consist of a morning of **curricular, classroom-based enrichment** and afternoons of **field trips** in and around Boston. Each camp uses the city as a **classroom without walls**, and the

summer culminates in a show and final trips. An essential element of the summer program is **community partnership**; teens who are often former campers are hired as junior or senior counselors, and parents and community leaders play an important role in shaping and working with the program. Many camps have been operating for decades.

**The Summer Urban Program (SUP) is one of the most remarkable, intensive student-run service experiences available to undergraduates, and has had a profound impact on undergraduates and community youth alike.**

## *Where are the Summer Urban Programs?*

CHECK OUT DETAILED DESCRIPTIONS OF OUR PROGRAMS AT [WWW.PBHA.ORG/PBHA/SUP/](http://WWW.PBHA.ORG/PBHA/SUP/)

**The communities that the Summer Urban Programs serve have known us for decades. SUP runs...**

- three camps based in housing developments in Cambridge (CYEP)
- one camp in Academy Homes & Orchard Gardens housing developments in Roxbury (RYI)
- one in Mission Hill housing development (MHSP)
- one for recent immigrants and refugees in the Dorchester community (BRYE)
- one in Chinatown (CHAD)
- one in the Franklin Hill & Field developments of Dorchester (Franklin I-O)
- one based in Villa Victoria and other neighborhoods in the South End (Keylatch)
- one in various developments located around South Boston (SBOS)
- one in Jamaica Plain for the Native American community of Boston (NAYEP)
- one evening ESL program for refugee teens from around the greater Boston area (RYSE)

## *What you receive and dates of commitment*

- As a Senior Counselor you will receive a **fixed** stipend of **\$3,100-3,200** (the stipend for RYSE Senior Counselors is slightly less) which will be paid weekly over the entire summer. You will also receive **free housing** at Harvard or in the community where you work.
- The dates of the summer commitment are **June 21<sup>st</sup>-August 20<sup>th</sup>** for all programs.

## S E N I O R   C O U N S E L O R   J O B   D E S C R I P T I O N

Senior Counselors work with groups of children for 7 weeks during the summer (RYSE works with high school students), implementing self-designed curriculum. In most programs, Senior Counselors work with Junior Counselors who are teenagers hired from the particular community in which the program is located. In some programs, Senior Counselors have the opportunity to live onsite thus allowing them to be a resource for families affiliated with the program. Senior Counselors are expected to keep in close contact with parents and community members as well as join the rest of the staff on a variety of retreats and trainings throughout the summer. Senior Counselors will receive a fixed stipend of **\$3,100-3,200** (the stipend for RYSE Senior Counselors is slightly less) which will be paid weekly over the summer. The summer commitment runs from **June 21<sup>st</sup> through August 20<sup>th</sup>** for most programs. **Senior Counselors are encouraged to limit outside commitments as community involvement and program preparation often extends beyond designated camp hours.**

*Senior Counselor Responsibilities include:*

### **I. Training**

Senior Counselors participate in a mandatory **two-week training** prior to the beginning of camp. This training gives counselors skills in curriculum and classroom strategies and community contact strategies. Counselors are also expected to attend any training designed by directors and any retreats planned.

### **II. Families**

For most programs, Senior Counselors are expected to:

- a. **meet with families** regularly to discuss their child's progress
- b. **share curriculum plans** with parents and ask for feedback
- c. when appropriate, invite parents on field trips and into the classroom

### **III. Teaching**

For most programs, Senior Counselors are expected to:

- a. develop a curriculum that fits the needs of their particular group of children
- b. discuss and share curriculum ideas with directors and other counselors
- c. integrate math, science, and reading into planned activities

### **IV. Administration**

For most programs Senior Counselors may be called upon to:

- a. help in camp administration
- b. make group decisions
- c. assist in general running of the camp such as van driving and lifeguarding

### **V. Fundraising**

- a. once hired Senior Counselors will be expected to take an active role in fundraising for their program
- b. often Senior Counselors will be asked to do small fundraisers with their group during the spring and summer

## A P P L I C A T I O N   A N D   H I R I N G   P R O C E S S

1. On the application you will be asked to check **a maximum of six** programs that you are interested in. Please submit as many copies of applications as camps that you are applying to (postmarked) by the deadline, **Friday, February 20<sup>th</sup>, 2003**. (e.g. if you apply to 4 camps submit 4 applications)  
Any applications received after this date will automatically be deferred to a second round pool.

No electronic submissions will be accepted.

If you are a Massachusetts resident please return the CORI and SORI (separate attachment) request forms with your application (only 1 copy of each).

If you are not a Massachusetts resident please return the CORI, SORI, and Out of State CORI forms.

PBHA will use these forms to conduct criminal offender and sexual offender background checks on you, only in the event that you are offered and accept a position with one of the SUP programs. Otherwise, these forms will be destroyed when you are eliminated from the candidate pool.

2. Interested applicants should consult the web page ([www.pbha.org/pbha/sup](http://www.pbha.org/pbha/sup)) as well as attend one of two info sessions prior to the application deadline.

Both will be held at Phillips Brooks House on Harvard Yard:

- ◆ **Wednesday, Feb. 11<sup>th</sup>, 2004 7:30-9PM**
- ◆ **Tuesday, Feb. 17<sup>th</sup>, 2004 7:30-9PM**

3. If asked for a first round interview after application review, you will be contacted by the directors of the individual camps via email.
4. There will be two rounds of interviewing. If asked back for a second round interview you may be asked by the directors of individual camps to submit a short essay answer to a specific question.
5. Offers will be made on **Friday, March 26<sup>th</sup>, 2003**. Applicants will be required to respond by **Monday, April 5<sup>th</sup>, 2003**.
6. If at any point you have not heard from particular camps or have questions regarding the process please do not hesitate to email Chris at [vena@fas.harvard.edu](mailto:vena@fas.harvard.edu)

**S U P O 3   S E N I O R   C O U N S E L O R   A P P L I C A T I O N**

Completed applications may be mailed or hand-delivered to:

**Summer Urban Programs  
c/o Chris Vena  
Phillips Brooks House Association  
Harvard University  
Cambridge, MA 02138  
Phone: (617) 495-5526**

Applications due  
(postmarked):  
**Friday Feb. 20<sup>th</sup>, 2003**

**Personal Information**

Name: \_\_\_\_\_ Class: \_\_\_\_\_

Social Security #: \_\_\_\_-\_\_\_\_-\_\_\_\_      Nine-Digit ID # (Harvard Students only): \_\_\_\_\_

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_      Dorm room Address (Harvard Students only): \_\_\_\_\_

University/ College Name: \_\_\_\_\_

Major/Concentration: \_\_\_\_\_      Expected Date of Graduation: \_\_\_\_\_

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

Home Address: \_\_\_\_\_

Phone: \_\_\_\_\_      Email: \_\_\_\_\_

Are you legally authorized to work in the United States?      Y      N

High School from which you graduated:

Name: \_\_\_\_\_      City: \_\_\_\_\_      State: \_\_\_\_\_

Date of graduation: \_\_\_\_\_

Would you have some type of funding for the summer (e.g. Work-Study, scholarship, stipend)? Y      N  
(If you are unsure of your funding status please check with your respective financial aid/student employment office to find out)

Do you have a valid driver's license?      Y      N      What year did you get it? \_\_\_\_\_

Would you be willing to learn to drive a 12-passenger van?      Y      N

Are you lifeguard certified?      Y      N

Would you be willing to get certified?      Y      N

Are you certified in CPR/First Aid?      Y      N      What year were you certified? \_\_\_\_\_

Please list any languages you speak (other than English) and your level of proficiency:

\_\_\_\_\_

Gender (optional)      M      F      Ethnicity (optional) \_\_\_\_\_

**Camps interested in**

Place a check beside the camps to which you are applying. This should not be a ranking. You can apply to a maximum of six camps. If you feel that you are unable to make a decision about a program at this time you can apply to SUP in general. To find out more about the individual camps please be sure to attend one of the info sessions listed above.

- \_\_\_ Boston Refugee Youth Enrichment (BRYE)
- \_\_\_ Chinatown Adventure (CHAD)
- \_\_\_ Cambridge Youth Enrichment Program (CYEP)
- \_\_\_ Franklin I-O
- \_\_\_ Keylatch Summer Program
- \_\_\_ Mission Hill Summer Program
- \_\_\_ Native American Youth Enrichment Program (NAYEP)
- \_\_\_ Roxbury Youth Initiative (RYI)
- \_\_\_ Refugee Youth Summer Enrichment (RYSE)
- \_\_\_ South Boston Outreach (SBOS)
- \_\_\_ I am unable to make a decision and would like to apply to SUP in general

**Qualifications and Experience**

1. Please attach a one-page resume briefly describing your major extra-curricular/ summer activities and employment.
2. Please write an essay describing any relevant experience you have.

**References**

Please list three references who know of your capabilities, talents and character. One should be a previous employer. NO relatives or friends, please. (Optional: Please include a letter of reference)

Name: \_\_\_\_\_ Relation: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Relation: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Relation: \_\_\_\_\_ Phone: \_\_\_\_\_

**Background Check**

Please read the following statements and sign your name:  
*As a requirement by Massachusetts law for working with children, I authorize PBHA to perform a criminal and sex offender background check on my record. (Please note that attached to this application are the necessary forms to complete. The information on these forms will only be used if you are hired.)*

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

*I have no criminal record.*

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



**CORI REQUEST FORM**

Phillips Brooks House has been certified by the Criminal History Systems Board for access to conviction and pending criminal case data. As an applicant for the position of \_\_\_\_\_, I understand that a criminal record check will be conducted for conviction and pending criminal case information only and that it will not necessarily disqualify me. The information below is correct to the best of my knowledge.

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

\_\_\_\_\_  
APPLICANT INFORMATION (PLEASE PRINT)

\_\_\_\_\_  
LAST NAME

\_\_\_\_\_  
FIRST NAME

\_\_\_\_\_  
MIDDLE NAME

\_\_\_\_\_  
MAIDEN NAME OR ALIAS (IF APPLICABLE)

DATE OF BIRTH: \_\_\_\_\_ SOCIAL SECURITY NUMBER: \_\_\_\_\_  
(Requested but not required)

ADDRESS: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

REQUESTED BY: \_\_\_\_\_  
SIGNATURE OF CORI AUTHORIZED EMPLOYEE

THIS FORM IS USED FOR:  
Recreational programs for children  
Educational/athletic instructional training to children  
Emergency shelters

3/00

NAME OF APPLICANT'S PROGRAM  
\_\_\_\_\_

DATE: \_\_\_\_\_

**Out of State CORI Form  
(for individuals with permanent residence outside MA)**

First Name \_\_\_\_\_

Middle Name \_\_\_\_\_

Last Name \_\_\_\_\_

Maiden Name \_\_\_\_\_

Permanent Home Address (including city/state/zip)  
\_\_\_\_\_  
\_\_\_\_\_

Date of Birth \_\_\_\_\_ Place of Birth \_\_\_\_\_

Citizenship \_\_\_\_\_

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

Driver's License Number and State \_\_\_\_\_

Sex \_\_\_\_\_ Race \_\_\_\_\_ Height \_\_\_' \_\_\_" Weight \_\_\_\_\_ lbs.

Eyes \_\_\_\_\_ Hair \_\_\_\_\_

I give permission to PBHA to have access to my criminal records for the purpose of employment.

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(Signature) \_\_\_\_\_ (Date) \_\_\_\_\_

Special Information Requests by State:

Georgia: Copy of Picture ID

**COMMONWEALTH OF MASSACHUSETTS  
SEX OFFENDER REGISTRY BOARD**

**REQUEST FOR SEX OFFENDER REGISTRY INFORMATION**

All requests for sex offender information must be made on this form and mailed to the Sex Offender Registry Board, P.O. Box 4547, Salem, MA 01970, along with a self-addressed stamped envelope. The Board will provide a report that includes the following information: whether the person identified is a sex offender with an obligation to register, the offense(s) for which the offender was convicted or adjudicated, and the date(s) of the conviction(s) or adjudication(s). *Please be advised that the law only permits the public to receive information on sex offenders required to register and finally classified by the Board as a level 2 (moderate risk) or level 3 (high risk) offender. Therefore, information is not available to the public if the identified individual is a level 1 (low risk) offender or if he/she has not yet been finally classified by the Board.* All requests shall be recorded and kept confidential, except to assist or defend in a criminal prosecution.

**Requestor's name:** \_\_\_\_\_ **Date of birth:** \_\_\_\_\_

**Address:** \_\_\_\_\_ **Telephone number:** \_\_\_\_\_

\_\_\_\_\_

I swear under the pains and penalties of perjury that I am the above-named person, at least 18 years of age, and I am requesting information for my own protection, the protection of a child under 18 years of age, or for the protection of another person for whom I have responsibility, care or custody.

**Requestor's signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

I hereby request that the following information be used to determine whether the identified individual is a sex offender required to register in Massachusetts.

**Subject's name:** \_\_\_\_\_

**Date of birth or approximate age:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Personal identifying characteristics:**

**Sex:** \_\_\_\_\_ **Race:** \_\_\_\_\_ **Height:** \_\_\_\_\_ **Weight:** \_\_\_\_\_ **Eye Color:** \_\_\_\_\_ **Hair Color:** \_\_\_\_\_

**Other information (e.g. license plate number, parents' names, etc.):** \_\_\_\_\_

\_\_\_\_\_

**\*\*\*\*\*WARNING\*\*\*\*\***

***SEX OFFENDER REGISTRY INFORMATION SHALL NOT BE USED TO COMMIT A CRIME OR TO ENGAGE IN ILLEGAL DISCRIMINATION OR HARASSMENT OF AN OFFENDER. ANY PERSON WHO USES INFORMATION DISCLOSED PURSUANT TO M.G.L. C. 6, §§ 178C – 178P FOR SUCH PURPOSES SHALL BE PUNISHED BY NOT MORE THAN TWO AND ONE HALF (2 ½) YEARS IN A HOUSE OF CORRECTION OR BY A FINE OF NOT MORE THAN ONE THOUSAND DOLLARS (\$1000.00) OR BOTH (M.G.L. C. 6, § 178N). IN ADDITION, ANY PERSON WHO USES REGISTRY INFORMATION TO THREATEN TO COMMIT A CRIME MAY BE PUNISHED BY A FINE OF NOT MORE THAN ONE HUNDRED DOLLARS (\$100.00) OR BY IMPRISONMENT FOR NOT MORE THAN SIX (6) MONTHS ( M.G.L. C. 275, § 4).***