

# APPLICATION FOR NEW YOUTH CAMP DIRECTOR OR ALTERNATE DIRECTOR APPROVAL

Section 19a-422 of the Connecticut General Statutes requires that an Office of Early Childhood (OEC) approved director be on site at all times camp is in operation. The camp director is responsible for all activities and sites operated under the camp license and responsible for maintaining the requirements of the youth camp statutes and regulations found at [www.ct.gov/oec/camps](http://www.ct.gov/oec/camps). Furthermore, the camp director must have accessible and be familiar with all the documentation and information relative to each activity and site operated under the license so that the information, documentation and materials can be provided to the staff of the Agency during inspections. If the camp director is not available, an Agency approved alternate director must be present at the youth camp to fulfill these responsibilities.

Date Application Received *OEC*  
*Use Only*

Approval #YCDR.0

In order to qualify for approval as a youth camp director or alternate director, an individual must be 21 years of age, and must have either: served at least one summer as a camp director or have had at least 16 weeks administrative or supervisory experience in an organized camp or completed equivalent training or experience in camping.

## PLEASE PRINT CLEARLY AND COMPLETE ALL INFORMATION REQUESTED

Legal First Name \_\_\_\_\_ M.I. \_\_\_\_\_ Last Name \_\_\_\_\_ Suffix (Ex. Jr.) \_\_\_\_\_

Former/Maiden Name \_\_\_\_\_ Birth Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Permanent Mailing Address 1 \_\_\_\_\_ Mailing Address 2 \_\_\_\_\_

City / Town \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ If not USA, Country \_\_\_\_\_

Home Phone # (\_\_\_\_) \_\_\_\_\_ Home Fax # (\_\_\_\_) \_\_\_\_\_

Personal Cell # (\_\_\_\_) \_\_\_\_\_ Personal Email Address \_\_\_\_\_

I certify that I have read the current Youth Camp Statutes and Regulations at the Agency website @ <http://www.ct.gov/oec/camps> If approved, what is the license number, name & address of the camp you plan to initially work at?

License # of Camp YCYC.0 \_\_\_\_\_ Camp Name \_\_\_\_\_

Camp Address \_\_\_\_\_

Position      Check One       Camp Director       Alternate Director

If you will be working at any other licensed youth camps, provide the camp license numbers and position for each camp:

License # of Camp YCYC.0 \_\_\_\_\_ Check One       Camp Director       Alternate Director

License # of Camp YCYC.0 \_\_\_\_\_ Check One       Camp Director       Alternate Director

License # of Camp YCYC.0 \_\_\_\_\_ Check One       Camp Director       Alternate Director

License # of Camp YCYC.0 \_\_\_\_\_ Check One       Camp Director       Alternate Director

New camp, not yet licensed. Please provide the exact name of camp on application submitted to OEC so your name can be added to the camp. \_\_\_\_\_

Camp Name \_\_\_\_\_

Camp Address \_\_\_\_\_

Not yet employed at a camp      Page 1 of 2      Office Use Only Filing Town \_\_\_\_\_

Have you served at least one summer as a Camp Director? If yes, provide camp name, address and dates of service.

Dates of Service \_\_\_\_\_

If you have not served at least one summer as a Camp Director, list administrative or supervisory experience that you have had in an organized camp including the name and address of organized camp, position held, exact dates of service and a detailed list of duties performed.

Camp Name \_\_\_\_\_

Camp Address \_\_\_\_\_

Position Held \_\_\_\_\_

Dates of Service \_\_\_\_\_

List of Duties Performed (may attach additional pages if necessary) \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

If you have not served at least one summer as a Camp Director, list other training and experience with children that you have had including a detailed description of the training/experience and dates of training/experience.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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I hereby certify that I have not been convicted of any offense involving moral turpitude, have not been declared legally insane or mentally incompetent, and do not illegally use any narcotic or controlled drug. I promise to uphold and maintain all standards required under the Connecticut General Statutes and Regulations of Connecticut State Agencies governing the licensure and operation of a youth camp. I certify that all of the above statements contained herein are true and correct to the best of my knowledge. Any false statements made herein are punishable in accordance with Sections 53a-157 and 19a-423.

\_\_\_\_\_  
Signature of Individual Seeking Approval as Director/Alternate Director

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Date Signed

Mail your application with original signature to the State of Connecticut Office of Early Childhood, 410 Capitol Avenue, MS #12 CBR, P. O. Box 340308, Hartford, CT 06134.

If approved, a certificate of approval will be mailed to the applicant at their permanent mailing address. Applicants may also verify approval and obtain their approval number at the Agency's website @ <https://www.elicense.ct.gov/Lookup/GenerateRoster.aspx>. From the list of available rosters, click on Youth Camp Licensing, check the box "Approved Youth Camp Directors," click on Continue, click on Download, and click on Open. Highlight column A by clicking on the "A" header. Click on Sort & Filter and select either A-Z or Z-A. The approval number is listed in column E and starts with YCDR. with a five digit number.