



CSI/IDAA SUMMER DANCE CAMP INTENSIVE DORM MOM QUESTIONNAIRE

Name: _____

Address: _____

Phone #: _____

Dancer's Name: _____

Your email: _____

Week(s) Preferred: _____

1. How are you at settling disputes? (Give discipline methods, temper-level, specific examples, etc.)

2. What experience have you had dealing with children ages 9-18? (List at-home and out-of-home.)

3. What special talents would you bring to dance camp that would either help you be a better dorm mom or enhance the students' experience?

4. Do you have small children at home? If so, what arrangements would you make for their care during Dance Camp?

5. List some activities (games, crafts, etc.) that you could lead the girls in during Dance Camp.

6. What do you consider your weaknesses?

7. What are your teamwork skills / people skills?

8. Where does your daughter or son take their dance lessons?

Studio Name: _____

Studio Address: _____

Instructor/Owner Name: _____ Their Phone: _____

Their email address: _____

How many years has your child taken dance? _____

Please complete questionnaire and CSI application by May 1st and return to:

Camille Barigar

College of Southern Idaho

P.O. Box 1238

Twin Falls, ID 83303-1238

Or e-mail to cbarigar@csi.edu