

VOLUNTEER STAFF APPLICATION

CHECK CAMP(S) YOU ARE APPLYING FOR:

Day Camp – Camp: _____ Week _____ Cub Scout / Webelos Partner – Camp: _____

APPLICANT INFORMATION

Last Name	First Name	M.I.	Date
Street Address			
City	State	ZIP	
Phone	E-mail Address		
Cell Phone	Date of Birth		
Dates Available			
Are you a citizen of the United States?	YES <input type="checkbox"/> NO <input type="checkbox"/>	If no, are you authorized to work in the U.S.?	YES <input type="checkbox"/> NO <input type="checkbox"/>
Have you ever worked for Boy Scouts of America?	YES <input type="checkbox"/> NO <input type="checkbox"/>	If so, when?	
Have you ever been convicted of a felony?	YES <input type="checkbox"/> NO <input type="checkbox"/>	If yes, explain	

EDUCATION

High School		Address		
From	To	Did you graduate?	YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree
College		Address		
From	To	Did you graduate?	YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree

REFERENCES

Please list three professional and personal references.

Full Name	Relationship
Company	Phone ()
Address	
Full Name	Relationship
Company	Phone ()
Address	
Full Name	Relationship
Company	Phone ()
Address	

CERTIFICATIONS AND TRAINING

National Camp School – Section: _____

Other Certifications – Please describe:

CPR – Expiration Date: _____

First Aid – Expiration Date: _____

Lifeguard / BSA Lifeguard – Expiration Date: _____

Please attach copy of certifications with Volunteer Staff Application

Youth Protection Training - Date Completed: _____

Other Training Completed – Please describe:

Leader Specific Training – Date Completed: _____

“This is Scouting” Training – Date Completed: _____

Hazardous Weather Training - Date Completed: _____

Safe Swim Defense - Date Completed: _____

Safety Afloat - Date Completed: _____

CAMP STAFF POSITIONS – PLEASE CHECK POSITIONS YOU ARE INTERESTED IN APPLYING FOR:

Office Manager

Aquatics Staff (Lifeguard)

Assistant Aquatics Director

Den Leader

Assistant Cook

Trading Post Manager

Scout Skills Director

Program Area Staff

Nature Director

Counselor-In-Training

Sports Director

Archery Director

Boating Director

Kitchen Staff

Camp Health Officer

Other: _____

DATES AVAILABLE

Dates: _____ to _____

SCOUTING BACKGROUND

Currently Registered As:

District: _____ Council: _____

Highest Rank Earned:

Member of the Order of the Arrow? Yes No

Other Scouting Experience:

DISCLAIMER AND SIGNATURE

I certify that my answers are true and complete to the best of my knowledge. If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Printed Name

Signature

Date