## **Housatonic Council, Boy Scouts of America**

326 Derby Avenue Derby, CT 06418 (203) 734-3329

#### CUB SCOUT DAY CAMP STAFF APPLICATION, DEN GUIDE & DEN CHIEF APPLICATION

A good employee follows directions carefully. Please PRINT or TYPE

#### PERSONAL INFORMATION

Name:	Social Security #:					
Address						
City		State	Zip			
Home#:()	Work#:(	)	Cell#:(	_)		
Date of Birth:		Dates Available: Fro	om	To		
College Address:						
City:		State:	Zip:			
Driver's License #:		State Issued:	Expiration Da	te:		
EMERGENCY CONTACT INFORMATION						
Name:	Relationship:	Ado	dress:			
Home#:	Work#:		Cell#:			
<b>EDUCATION</b>						
High School Attended:			Year Gradu	ated:		
College Attended:		Major:		Degree:		
		Major:		Degree:		
Other Education:		Course of	Study:			
SCOUTING EXPERIENCE						
Pack #:	Troop #:	Crew#: _		Post #:		
Length of time as an Adult Scouter:						
Other Scouting Experience:						
Length of time as a Boy Scout:		Highest	Rank Achieved: _			
Length of time as a Cub Scot	ıt:					
Current Pack/Troop/Post Pos	ition:					

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# Please indicate $1^{st}$ , $2^{nd}$ & $3^{rd}$ choice below.

Staffing requirements vary from year to year. Some positions may be combined or eliminated in any given year.

Minimum Age:	Minimum Age	<u>.</u>
21 Camp Director21 Program Director21 Tot Lot Director21 Aquatics Director21 Health Officer (First Aid)21 B.B. Gun Director21 Den Guide	18 Archery 16 Crafts D 16 Nature I 16 Sports D 16 Scout C 16 Lifegual 15 Den Chi	virector Director Director raft Director rd
I will meet the minimum age requiremen	ts by June 1st: Yes	or No
AQUATIC EXPERIENCE	<u>GENERAL</u>	<u>TRAINING</u>
SwimmingLifesavingRowingCanoeingSailingRed Cross Lifesaving**Water Safety Instructor**Red Cross Advanced Training**National Camp School**Aquatics Training**C.P.R. Training **Date	BasketryIndian LoreLeatherworkMetalworkWoodcarving	Pack/Troop Leader TrainingWoodbadgeNational Camp School** Subject Year # of Years on Camp Staff
PROGRAM EXPERIENCE	SCOUTCRAFT EXPERIENCE	MEDICAL EXPERIENCE
Song LeadingMusicCampfiresLeading GamesArts & CraftsDrama/Skits	Camping Cooking Pioneering Hiking First Aid Emergency Preparedness Orienteering Wilderness Survival	E.M.TParamedicNursing StudentL.P.NR.NC.P.R. Training **Date
SHOOTING SPORTS	ECOLOGY/CONSERVATION	
ArcheryB.B. GunsNational Camp School**	General ScienceEnvironmental ScienceSoil & ConservationFish & WildlifeFishing	
**Please attach a copy of current certific	ation	
HOBBIES A	ND/OR OTHER WORK EXPER	RIENCES

### PLEASE EXPLAIN WHY YOU WOULD LIKE TO WORK AT DAY CAMP

PERSONAL REFERENCI	ES – Please lis	t three (not relatives)
Name	Phone	
AddressCity	Relationship	
Name		
Address	Relationship	)
City		
NameAddress	Phone Relationshir	9
AddressCity	State	Zip
T-shirt Size         # of Days Volunteering/           _Small        1           _Medium        2           _Large        3           _X-Large        4           _XX-Large        5	Week 1	# of Days Volunteering/Week 212345
The Housatonic Council, Boy Scouts of America, is an equal position offered. <i>Note</i> : Applicants are not required to give application will be given every consideration, but its receipt I understand that Housatonic Council activities are I hereby submit my application in accordance will Promise & Law. I agree to be loyal to and cooperate fully	e any informatio does not imply t e considered a sn th the principles	n on this application that is prohibited by law. This hat the applicant will be accepted to be on staff.  noke-free environment.  s of the organization; subscribe to the Scout Oath or
described in this application. I further agree to submit a interview may be required before being accepted as camp sta	completed Heal	
I authorize investigation of all statements contained decision, including but not limited to, any investigation of all my previous employers, schools and all other references provided by me in this application is accurate and complete misrepresentation in this application is cause for discharge and	statements made to furnish reference to the best of n	nces requested. I hereby declare that the information ny knowledge. I understand that any falsification or
Background checks and driver's license are requexpense if completed.	iired for anyone	over 18 years of age and will be at the Council's
Signature of Applicant		
Parent's Approval (if under 18)		
Scoutmaster's Approval (if under 18)		
FOR OFFICE USE ONLY		
Date of Interview:	_ Interv	iewed by
Charles 16 an	TT' 1	Com