

For office use only:

Date received _____

2010 CAMP STAFF APPLICATION
CAMP SOL MAYER

Thank you for your interest in serving on the summer staff at Camp Sol Mayer. Please complete this application and submit it by April 1, 2010 to:

Concho Valley Council
2010 Camp Staff Application
P.O. Box 1584
San Angelo, TX 76902-1584

STAFF INTERVIEWS WILL BE CONDUCTED
AT THE 2010 OA SPRING ORDEAL

STAFF WEEK: Sun., June 6 to Fri., June 11

FIRST WEEK: June 13 - June 19

SECOND WEEK: June 20 - June 26

Staff is released on Sunday, June 27

PERSONAL INFORMATION

Age 18+ ___ yes ___ no

Name _____

If not 18+, age as of June 1, 2010 _____

Address _____

City _____ State _____ Zip _____

Phone number _____

email address _____

CHECK POSITION(S) DESIRED

Note: Must be required age by June 1, 2010

Minimum age - 21

- ___ Program Director ¹
- ___ Aquatics Director ¹
- ___ Camp Chef (cook)
- ___ Shooting Sports Director ¹
- ___ Health Officer ³
- ___ Ranch Adventure Director
- ___ Climbing Director ¹
- ___ Business Manager
- ___ Camp Chaplain ²

Minimum Age - 18

- ___ Archery Director
- ___ Trail Blazer Director
- ___ Waterfront Director
- ___ Camp Commissioner ²
- ___ Ranch Adventure Assistant
- ___ Trading Post Manager
- ___ Nature/ Ecology Conservation Director ²

Merit Badge Instructor/ Assistant

- ___ Trail Blazer Assistant
- ___ Handicrafts Instructor
- ___ Shooting Sports Instructor
- ___ Dining Hall Staff
- ___ Aquatics Instructor
- ___ Boating Instructor
- ___ Scout Skills Instructor
- ___ Climbing Instructor
- ___ ScienceInstructor
- ___ SportsInstructor
- ___ Other (specify) _____

¹ Requires National Camp School Certification

² National Camp School Certification recommended

³ Health Officer requires either an EMT, EMT-1, Paramedic, Nurse, PA, DO or MD

CIT (Counselor in Training)

CIT (Counselors in Training) Must be at least 14 years of age. CITs will only be allowed to stay at camp for one week. They will be expected to rotate to several programs throughout the week.

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Have you ever been convicted of a felony? ____ Yes ____ No

(You may answer **no** if your conviction was ordered sealed, expunged or eradicated.)

Are you permitted to be lawfully employed with the United States? ____ Yes ____ No

Do you have any physical disabilities that might interfere with performance of the job that you are applying for? ____ Yes ____ No

If yes, explain _____

SCOUTING AND PROGRAM BACKGROUND

Have you attended a BSA National Camping School in the last 5 years: ____ Yes ____ No

Location: _____ Date: _____ Expiration: _____

CHECK TYPE OF CERTIFICATION

- | | | |
|-----------------------|---------------------|----------------------|
| ____ Camp Management | ____ Nature/Ecology | ____ COPE |
| ____ Program Director | ____ Chaplain | ____ High Adventure |
| ____ Commissioner | ____ Aquatics | ____ Shooting Sports |
| ____ Scoutcraft | ____ Climbing | |

Shooting Sports Certifications:

- | | |
|--|------------------------|
| ____ NRA Muzzle-loading Rifle Instructor | Expiration Date: _____ |
| ____ NRA Rifle Instructor | Expiration Date: _____ |
| ____ NRA Shotgun Instructor | Expiration Date: _____ |
| ____ National Archery Association Instructor (Level _____) | Expiration Date: _____ |

Are you currently a registered member of the Boy Scouts of America? ____ Yes ____ No

Unit number _____ Position _____ Council _____

Highest Rank (if applicable) _____

Current Unit Leader _____ Phone _____ email _____

Have you previously worked at summer camp? ____ Yes ____ No

If yes, please answer the following:

- | | | | |
|------------|------------|----------------|------------------------|
| Year _____ | Camp _____ | Position _____ | Salary _____ /per week |
| Year _____ | Camp _____ | Position _____ | Salary _____ /per week |
| Year _____ | Camp _____ | Position _____ | Salary _____ /per week |

CERTIFICATES: (First Aid, CPR, Lifeguard, youth protection, etc.,)

Expiration Date

_____	_____
_____	_____
_____	_____

LEADERSHIP COURSES: (JLT, Philmont NJLS, etc.)

Date Attended

_____	_____
_____	_____

SUMMER CAMP ATTENDANCE

Date Attended

_____	_____
_____	_____

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LIST COUNCIL EVENTS WHERE YOU HAVE BEEN A STAFF MEMBER:

____ Webelos Woods ____ Family Camp
____ Fun with Son ____ Mom n' Me
____ Cub Scout Day Camp ____ Other--List _____

Are you a member of the Order of the Arrow? ____ Yes ____ No

Lodge _____ Ordeal ____ Brotherhood ____ Vigil ____

MERIT BADGES

Please rank your skill and experience in ALL of the following areas according to the numbers below.

- 1-I am able to organize and teach activities in this area on my own.
- 2-I am able to assist in teaching this activity.
- 3-I have experience in this activity only as a participant.
- 4-I have no experience in this activity.

____ Archaeology	____ Fire Safety	____ Pioneering
____ Archery	____ First Aid	____ Radio
____ Art	____ Fish & Wildlife Management	____ Reptile Study
____ Astronomy	____ Fishing	____ Rifle Shooting
____ Backpacking	____ Fly Fishing	____ Rowing
____ Basketry	____ Geology	____ Safety
____ Camping	____ Golf	____ Shotgun
____ Canoeing	____ Graphic Arts	____ Soil & Water Conservation
____ Cinematography	____ Horsemanship	____ Space Exploration
____ Climbing	____ Indian Lore	____ Swimming
____ Cooking	____ Leatherwork	____ Theater
____ Energy	____ Lifesaving	____ Weather
____ Emergency Preparedness	____ Mammal Study	____ Wilderness Survival
____ Environmental Science	____ Nature	____ Woodcarving
____ Farm Mechanics	____ Orienteering	

EDUCATIONAL BACKGROUND

HIGH SCHOOL _____ GRADE COMPLETED _____

COLLEGE _____ MAJOR _____ YRS COMPLETED ____

COLLEGE _____ MAJOR _____ YRS COMPLETED ____

EMPLOYMENT INFORMATION (please list most recent employer first)

1. Employer _____ Nature of Job _____
Dates Employed _____ Reason for leaving _____
2. Employer _____ Nature of Job _____
Dates Employed _____ Reason for leaving _____
3. Employer _____ Nature of Job _____
Dates Employed _____ Reason for leaving _____

REFERENCES List three people (other than immediate family) who can be contacted for more information.

1. Name _____ Relationship _____
Address _____
Phone Number _____ email _____

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REFERENCES (CON'D)

2. Name _____ Relationship _____
Address _____
Phone Number _____ email _____

3. Name _____ Relationship _____
Address _____
Phone Number _____ email _____

Explain why you want to work as a Staff member at Camp Sol Mayer.

**All employees are expected to be available for Staff Week and the full camping season.
(exceptions must be requested in writing before employment)**

I know of no reason why my health would limit full Camp participation, and if employed I will provide an up-to-date physical examination.

I am/will be a registered member of the Boy Scouts of America and understand that I must have a complete Class A uniform (shirt, shorts and socks) with proper placement of all patches.

I hereby make application for summer employment, and in accordance with the principles of the organization, subscribe to the Scout Oath, Scout Law, and Declaration of Religious Principle. If selected, the Boy Scouts of America can expect my loyalty to management, its policies, programs and my full cooperation with other members of the staff. I understand that a personal interview may be required before employment.

I authorize the investigation of all statements contained in this application for employment as it may be necessary in arriving at an employment decision. I authorize all of my current and previous employers, schools, and other references to furnish the information requested to reach an employment decision. I declare that the information provided by me in this application for employment is correct, to the best of my knowledge. I understand that any falsification or misrepresentation may be cause for not being considered for employment. This application does not guarantee an interview or a position on staff.

Applicant's Signature _____
Date

REQUIRED APPROVALS (If under 18)

Parent or Guardian Approval

Signature _____
Date

Scout Leader Approval

Signature _____
Date