

# CAMP STAFF APPLICATION

Crater Lake Council – BSA  
3039 Hanley Road – Central Point OR 97502  
541.664.1444 Fax: 541.664.6121



BOY SCOUTS OF AMERICA®  
CRATER LAKE COUNCIL

Thank you for your interest in joining Crater Lake Council’s Camp Staff. Serving as a Staff member at a BSA summer camp is a wonderful experience! You will develop leadership skills, make a lot of friends and help Scouts have a Mountain-Top Scouting Experience! Working at camp is not just a job; it’s a lifestyle and a BLAST! The Crater Lake Council is looking for individuals that have the “Right Stuff” to be members of our staff. We look forward to meeting with you and discussing how your skills and knowledge can help affect the lives of hundreds of youth by ensuring they have the Adventure of a Lifetime this summer!

To qualify for employment at camp, the applicant must be at least 15 years of age by June 1<sup>st</sup> (14 as a Counselor-in-training), and have a letter of reference (pg 5) from a Scoutmaster or employer. It is expected that applicants be available for the full season. Exceptions may be requested during the interview.

Please mail, deliver or fax your completed application to the Crater Lake Council Office at 3039 Hanley Road, Central Point OR 97502. Fax: 541.664.6121.

INTERVIEWS: Interviews occur on 2 dates:

- Central Point, OR: last Saturday in February
- Bend, OR: First Saturday in March

\* If you are unable to attend either of these 2 dates, please contact the Council office 541.664.1444

## Personal Information

Name \_\_\_\_\_ Date \_\_\_\_\_

Home Address \_\_\_\_\_ Home Phone \_\_\_\_\_  
Number & Street City State Zip

College Address \_\_\_\_\_ Other Phone \_\_\_\_\_  
(If Applicable) Number & Street City State Zip

E-mail Address \_\_\_\_\_ Cell Phone \_\_\_\_\_

Age on June 1st of 2015:  14  15-17  18-20  21 or older Adult T-shirt Size \_\_\_\_\_

## Scouting Experience

Currently Registered in Troop/Crew \_\_\_\_\_ District \_\_\_\_\_ Council \_\_\_\_\_

I am not registered with the BSA.

Current Rank \_\_\_\_\_ Current Scouting Position \_\_\_\_\_ Years in Scouting \_\_\_\_\_

Other Awards Earned (Nova, Venturing, etc) \_\_\_\_\_

Check all that apply:

- |                                     |   |  |
|-------------------------------------|---|--|
| <input type="checkbox"/> NYLT       | <input type="checkbox"/> Wood Badge       | <input type="checkbox"/> Powder Horn       |
| <input type="checkbox"/> NYLT Staff | <input type="checkbox"/> Wood Badge Staff | <input type="checkbox"/> Powder Horn Staff |
| <input type="checkbox"/> OA Ordeal  | <input type="checkbox"/> OA Brotherhood   | <input type="checkbox"/> OA Vigil          |



# CAMP STAFF APPLICATION

Crater Lake Council – BSA  
3039 Hanley Road – Central Point OR 97502  
541.664.1444 Fax: 541.664.6121



BOY SCOUTS OF AMERICA®  
CRATER LAKE COUNCIL

## Education

High School/College Attending(ed) \_\_\_\_\_ Grade \_\_\_\_\_ Major \_\_\_\_\_

Extra-curricular Activities: \_\_\_\_\_  
\_\_\_\_\_

## Camping Experience

Total # of years as a camper at a BSA Summer Camp: \_\_\_\_\_ as a staffer: \_\_\_\_\_

Previous Camp Staff Experience:

Year \_\_\_\_\_ Camp \_\_\_\_\_ Position \_\_\_\_\_ Camp Director \_\_\_\_\_

Year \_\_\_\_\_ Camp \_\_\_\_\_ Position \_\_\_\_\_ Camp Director \_\_\_\_\_

Year \_\_\_\_\_ Camp \_\_\_\_\_ Position \_\_\_\_\_ Camp Director \_\_\_\_\_

## Hobbies, Interests & Skills

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

Why do you want to be on Camp Staff? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## References – List two personal references (someone who is not an immediate family member)

Name \_\_\_\_\_ Phone \_\_\_\_\_ E-mail \_\_\_\_\_

Name \_\_\_\_\_ Phone \_\_\_\_\_ E-mail \_\_\_\_\_

## Background info: (a “Yes” answer does not necessarily disqualify you)

- |   |     |    |
|---|-----|----|
| 1. Do you use illegal drugs?  | Yes | No |
| 2. Have you ever been convicted of a criminal offense, even as a minor<br><i>(Conviction of a crime is not an automatic bar to employment. All circumstances will be considered, including what you were convicted of and how long ago. Please provide complete information about any conviction by attaching a separate statement)</i> | Yes | No |
| 3. Have you ever been charged with neglect or abuse of a child or animal?   | Yes | No |
| 4. Has your driver’s license ever been suspended or revoked?  | Yes | No |
| 5. Other than the above, is there any fact or circumstance involving you or your background that would call into question your being entrusted with the supervision, guidance and care of young people?   | Yes | No |

If you answered yes to any of the questions, explain here: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



# CAMP STAFF APPLICATION

Crater Lake Council – BSA  
 3039 Hanley Road – Central Point OR 97502  
 541.664.1444 Fax: 541.664.6121



BOY SCOUTS OF AMERICA®  
 CRATER LAKE COUNCIL

## I would like to work at:

**Camp Makualla**  
*(Boy Scout Summer Camp)*

**Camp McLoughlin**  
*(Cub Scout Resident Camp)*

## Are you available to be at camp the entire season? (All weeks)

Yes

No

## Staff Position Preferences: Please rank in order of preference your top three choices (1 is your top choice)

*[14 Year olds - Counselors in Training – please mark your top 3 choices in program areas (don't worry about min. age) Counselors in Training (CIT's) will spend time in multiple program areas]*

Camp Management	Min. Age	Program Areas	Min. Age
<input type="checkbox"/> Program Director	21	<input type="checkbox"/> Aquatics	15
<input type="checkbox"/> Camp Commissioner	18	<input type="checkbox"/> Assistant Ranger	15
<input type="checkbox"/> Business Manager	21	<input type="checkbox"/> Archery	15
<input type="checkbox"/> Health Officer (EMT-B minimum)	21	<input type="checkbox"/> Nature	15
<input type="checkbox"/> Ranger	21	<input type="checkbox"/> Scoutcraft	15
<input type="checkbox"/> Chaplain	18	<input type="checkbox"/> Handicraft	15
		<input type="checkbox"/> Rifle ( <i>Makualla</i> )	15
		<input type="checkbox"/> Shotgun ( <i>Makualla</i> )	15
		<input type="checkbox"/> BB Gun ( <i>McLoughlin</i> )	15
		<input type="checkbox"/> Kitchen Staff / Food Service	15
		<input type="checkbox"/> Quartermaster	15
		<input type="checkbox"/> Trading Post	15

### Counselors in Training (CIT's)

Scouts at least 14 years old are eligible to be a CIT. This training program is challenging and rewarding. CIT's focus on developing themselves by working in a variety of program areas to gain skills and knowledge so that they can one day become a paid staff member.

## Specific Camp Skills – Please mark as follows: (1= some knowledge; 2= proficient; 3=can lead or teach)

<input type="checkbox"/> Aquatic Skills	<input type="checkbox"/> Campfire Program	<input type="checkbox"/> Group Games / Singing	<input type="checkbox"/> Geocaching
<input type="checkbox"/> Archery	<input type="checkbox"/> First Aid	<input type="checkbox"/> Pioneering	<input type="checkbox"/> Orienteering
<input type="checkbox"/> Woodworking	<input type="checkbox"/> Rifle / Black Powder	<input type="checkbox"/> Retail Sales	<input type="checkbox"/> Motor Boating
<input type="checkbox"/> Leatherwork	<input type="checkbox"/> Shotgun	<input type="checkbox"/> Cooking	<input type="checkbox"/> Water Sports
<input type="checkbox"/> Indian Lore	<input type="checkbox"/> Astronomy	<input type="checkbox"/> Instrument _____	<input type="checkbox"/> Sailing
<input type="checkbox"/> Photography	<input type="checkbox"/> Fishing / Fly Fishing	<input type="checkbox"/> Nature	<input type="checkbox"/> Other _____
<input type="checkbox"/> Chess	<input type="checkbox"/> Geology	<input type="checkbox"/> Archeology	<input type="checkbox"/> Other _____
<input type="checkbox"/> Art	<input type="checkbox"/> Insect Study	<input type="checkbox"/> Personal Fitness	<input type="checkbox"/> Other _____



**CAMP STAFF APPLICATION**  
**STAFF STATEMENT OF UNDERSTANDING,**  
**CODE OF CONDUCT & DISCLOSURE AUTHORIZATION**



**Statement of Understanding:** All staff members, both youth and adult, are selected based on their qualifications in character, camping skills, physical and personal fitness, and leadership qualities. By signing the letter of employment, all adult staff members as well as youth staff members and their parents or guardians agree to the conditions of the Staff Statement of Understanding and Code of Conduct as a condition of participation, with the further understanding that serious misconduct or infraction of rules may result in termination and expulsion from camp. Each staff member is responsible for his or her own behavior.

**All staff members are expected to abide by the Code of Conduct as follows:**

1. I will be guided by the Scout Oath and Scout Law and will obey all U.S. federal laws, as well as local and state laws.
2. I will set a good example by keeping myself neatly dressed and presentable.
3. I will attend all scheduled programs and participate as required in cooperation with other staff members and leaders.
4. I agree to follow the camp check-in and checkout procedures and to observe camp quiet hours.
5. I will be responsible for keeping my quarters and personal gear labeled, clean, and neat. I will adhere to all camp recycling policies and regulations. I will do my share to prevent littering of the campgrounds and agree to follow the principles of Leave No Trace.
6. I understand that the possession or consumption of alcoholic beverages, illegal drugs or misuse of prescribed drugs is prohibited at camp. I understand that the purchase, possession, or consumption of alcoholic beverages off council property must comply with state and federal law and must not affect my job performance.
7. Serious and/or repetitive behavior violations including use of tobacco, cheating, stealing, dishonesty, swearing, fighting, and cursing may result in termination or disciplinary action.
8. I understand that gambling of any form is prohibited.
9. I understand that possession of lasers of any type and possession or detonations of fireworks are prohibited.
10. Neither the camp nor BSA local council will be responsible for loss, breakage, or theft of my personal items. I will label all my personal items and check items of value at the direction of staff leaders. Theft on my part will be grounds for termination and expulsion from camp.
11. Cell phones, tablets, lab tops and personal devices can be a distraction. Use of such equipment during working hours may result in disciplinary action.
12. I will use camp equipment in a safe manner and for its intended purpose and will return the equipment in good condition.
13. I understand that staff members are prohibited from having firearms and weapons in their possession or on camp property, in accordance with U.S., local, and state laws.
14. I understand the importance of following BSA's Youth Protection and safety policies and will follow those guidelines and report all violations that come to my attention. I will complete the online Youth Protection Training and Venturing Youth protection training prior to my first day as a camp staff member and turn a copy of my certificate in to my Camp Director.
15. Hazing has no place in Scout camp, nor does running the gauntlet, belt lines, or similar physical punishment. As a staff member I agree to prevent and stop all hazing activities.
16. I will respect diversity – whether the differences are in physical characteristics or in perspectives.
17. I have the responsibility not to engage in behavior that constitutes discrimination or harassment in any way, including race, color, national origin, sex, religion, age, disability, or citizenship of an individual. This applies to everyone, including fellow staff members, campers, adult leaders, parents, and outside vendors.
18. I have the responsibility to report instances of discrimination or harassment (directed at me or at others) to the camp director or the Scout executive.
19. I will comply with this Code of Conduct and the policies printed in the **Camp Staff Handbook**. Any violation may result in expulsion from the camp at my own expense. I understand that all such decisions will be final.

**Staff Printed Name:** \_\_\_\_\_ **Staff Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Parent Signature (if staff is a minor):** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Disclosure authorization and release:**

1. I confirm that the information given on this application is correct and understand that providing false information may result in revocation of membership in the Boy Scouts of America. The Crater Lake Council may verify information.
2. Individuals selected for staffing may be asked to also staff Family Camps and or other camp offerings.
3. I know of no limitation that would limit full camp participation, and if employed I will provide an up-to-date physician evaluation form prior to reporting.
4. I am/will be a registered member of the Boy Scouts of America.
5. If selected, the Crater Lake Council, Boy Scouts of America, can expect my loyalty to management, my adherence to its Code of Conduct, national, local and camp policies and programs and my full cooperation with other members of the staff.
6. I request that full cooperation and disclosure be made by any person, entity or agency contacted by the Crater Lake Council. I agree to hold harmless any organization or person providing information to the Crater Lake Council and hereby authorize the release and disclosure of any and all information concerning me/my child, whether or not made confidential by state law. The Crater Lake Council is authorized to request information from schools, former employers, medical providers, and law enforcement authorities. I understand that my medical records and other medical information are protected under HIPAA / PHI regulations. The parent's signature grants the Crater Lake Council the right to inspect juvenile records.
7. All information obtained will be used by the Crater Lake Council and will not be disclosed for any purpose not related to employment.
8. I agree to participate in any drug testing process that may be adopted, and to support the Boy Scouts of America's policy of a drug and alcohol free camp.

**Applicant's Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**If under 18, Parent or Guardian Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

Approval of Scout Leader (if registered in Scouting): I have reviewed this application and believe that he/she is qualified for the position he/she is seeking.

**Unit Leader Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

# CAMP STAFF APPLICATION

Crater Lake Council – BSA  
3039 Hanley Road – Central Point OR 97502  
541.664.1444 Fax: 541.664.6121



BOY SCOUTS OF AMERICA®  
CRATER LAKE COUNCIL

## Seasonal Employment Reference Form

Applicant's Name: \_\_\_\_\_

This individual is applying for employment in the summer camping program of Crater Lake Council. The success of our operations and the enjoyment of our campers are very dependent on the quality of our camp staff. It is important that competent and mature individuals who are positive role models and live the values of the Scout Oath and Law fill all our staff positions. Your honest evaluation of this applicant will be greatly appreciated. Please complete this form and mail to the address below at your earliest convenience. Thank you for your time.

### How well do you know this applicant?

\_\_\_\_ Very Well      \_\_\_\_ Casually      \_\_\_\_ Rather Weak      \_\_\_\_ I Don't Know This Person

### Circle the words that best describe the applicant's behavior

<b>Attitude:</b>	Positive	Acceptable	Negative
<b>Dependability:</b>	Always	Usually	Irresponsible
<b>Speaking Ability:</b>	Very Verbal	Satisfactory	Limited Ability
<b>Leadership:</b>	Take Charge	When Asked	Follower
<b>Appearance</b>	Well Groomed	Usually Neat	Messy
<b>Initiative:</b>	Self-Motivated	Average Drive	Lazy
<b>Common Sense:</b>	Sound	Occasionally	None
<b>Integrity:</b>	Trustworthy	Usually Reliable	Lacking
<b>Personality:</b>	Outgoing	Pleasant	Bland
<b>Teamwork:</b>	Team Player	Cooperative	Obstructionist

Would you entrust the care of your children to this individual?      Yes      No

**Recommendation:**      Highly Recommended      Recommend      Do Not Recommend

Signature: \_\_\_\_\_ Relationship to Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

Please Print Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

Please add any additional comments you wish to share on the reverse side.  
Mail to: Crater Lake Council, 3039 Hanley Road – Central Point OR 97502

