



BOY SCOUTS OF AMERICA

CALIFORNIA INLAND EMPIRE COUNCIL



Today's Date: \_\_\_\_\_

# Application for Seasonal Summer Camp Staff

Please Print Clearly in Ink

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
Street City State Zip

E-Mail Address: \_\_\_\_\_

Will be available for employment (give exact dates): From: \_\_\_\_\_ To: \_\_\_\_\_

## Area of Interest

Please indicate your top three preferences. List any special skills, experience or qualifications you possess for that position.  
If hired, camp management reserves the right to re-assign staff.

- Aquatics**  
experience: \_\_\_\_\_
- Archery**  
experience: \_\_\_\_\_
- COPE**  
experience: \_\_\_\_\_
- Handy Crafts**  
experience: \_\_\_\_\_
- Kitchen Staff**  
experience: \_\_\_\_\_
- Medic**  
experience: \_\_\_\_\_
- Nature**  
experience: \_\_\_\_\_
- STEM**  
experience: \_\_\_\_\_
- Shooting Sports**  
experience: \_\_\_\_\_
- Outdoor Skills**  
experience: \_\_\_\_\_
- Trading Post**  
experience: \_\_\_\_\_

## Other skills, qualifications, training, experience, or certification

Other: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Sports: \_\_\_\_\_ Musical: \_\_\_\_\_

Hobbies: \_\_\_\_\_ Talents: \_\_\_\_\_

Clubs/Associations: \_\_\_\_\_

Awards: \_\_\_\_\_  
\_\_\_\_\_

Are you currently registered in Scouting?  Yes  No

Unit number: \_\_\_\_\_ Council: \_\_\_\_\_

Position(s): \_\_\_\_\_

Are you permitted to become lawfully employed in the United States?

*(Proof of citizenship or immigration status is required upon employment – Form I-9)*

Yes

No

**Camp Staff Experience (if any)**

Camp: \_\_\_\_\_ Program Area: \_\_\_\_\_ Date: \_\_\_\_\_

Camp: \_\_\_\_\_ Program Area: \_\_\_\_\_ Date: \_\_\_\_\_

Camp: \_\_\_\_\_ Program Area: \_\_\_\_\_ Date: \_\_\_\_\_

**EMPLOYMENT EXPERIENCE**

*(List most recent)*

Employer/Position	Address	Phone #	From	To
		( )		
		( )		
		( )		

**PERSONAL REFERENCES**

*(List at least three)*

Reference	Address	Phone #	How long known?

**EDUCATION**

Highest grade completed: \_\_\_\_\_

School: \_\_\_\_\_

Major: \_\_\_\_\_

Other: \_\_\_\_\_

**CAREFULLY READ THE FOLLOWING STATEMENTS BEFORE SIGNING**

I, the undersigned, understand that:

- A. If employed on the Council Camp Staff, I will be required to become registered as a member of the Boy Scouts of America, and to have a current (within one year) medical examination. A criminal background check is conducted on all adult registrants.
- B. The information that I have provided may be verified by contacting persons or organizations named in this application, and I hereby release and agree to hold harmless from liability any person or organization that provides information concerning me to the Boy Scouts of America or the California Inland Empire Council, Inc.
- C. Rules for acceptance and participation in the camp program and staff are the same for everyone without regard to race, color, national origin, age, sex or handicap. The California Inland Empire Council is an Equal Opportunity Employer.
- D. In signing this application, I affirm that the information that I have given herein is true and correct.

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of parent or guardian (if under age 18) \_\_\_\_\_ Date: \_\_\_\_\_

Please email this application to [campemerson@scouting.org](mailto:campemerson@scouting.org) or deliver to 1230 Indiana Court Redlands, CA 92374 For questions please call 909-793-2463

