

Check camp volunteering for:

Camp Emerson Boy Scout Camp

□ Wiley Cub Scout Camp

Today's Date: _

2017 Application for Volunteer 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 to volunteer (give exact dates):	From:	To:		

POSITION BEING APPLIED FOR

Please indicate your <u>top preferences</u>. If hired, camp management reserves the right to re-assign staff. (Minimum age listed – by checking a position you are acknowledging that you are at least that age)

 $\Box \quad Counselor-In-Training \qquad (14) \qquad \Box \quad Volunteer \qquad (14)$

CERTIFICATION Do you have:		YES	NO	Expiration Date
1.	A BSA National Camping School Certificate?			
_	Which Course?	_	_	
2.	An American Red Cross Water Safety Instructor's Certificate?			
3.	Other Aquatic or Lifesaving Training:			
4.	NRA Rifle/Pistol/Shotgun/MLR Instructor and/or RSO Certificate? CIEC BB Range Master? (Circle appropriate instructor certificates)			
5.	USAA/NFAA Level 1 / 2?			
6.	Standard First Aid Certification?			
7.	Advanced First Aid/EMT Certification?			
8.	CPR/AED Certification?			

CAMP EXPERIENCE

1. As a Scout:	3. As a Scout Staff Member:		
<u>Camp</u> <u>LocationDates</u>	<u>Camp</u> <u>LocationDates</u>		
2. Adult Scouting: <u>Camp</u> <u>LocationDates</u>	4. Non-Scout Camps Attended: <u>Camp</u> <u>LocationDates</u>		
Scouti	NG EXPERIENCE		
 Are you currently registered in Scouting? □ Yes □ No If registered, list position(s) held:	Years in Cub Scouts Years in Boy Scouts		
2. Past Adult Scouting Registration: Position Council Year	 4. Are you a member of the Order of the Arrow? Yes No Ordeal Brotherhood Vigil 5. BSA Training Cub Scout Leader Basic Training Boy Scout Leader Basic Training Wood Badge Training BSA Youth Protection Training 		
E	DUCATION		
Highest grade completed: Major:	School: Other:		
OTHER RELATED EX	XPERIENCE/QUALIFICATIONS		
Sports:	Musical:		
Hobbies:	Talents:		
Clubs/Associations:			
Awards: Other:			
Outor			

EMPLOYMENT EXPERIENCE AND REFERENCE – OTHER THAN BOSEKER SCOUT RESERVATION

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

PERSONAL REFERENCES

Reference	Address	Phone #	How long known?

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

YES

NO

ADDITIONAL INFORMATION

		110
1.	Do you use illegal drugs?	
2.	Have you ever been convicted of a criminal offense? (If yes, please explain below.)	
3.	Have you ever been charged with child neglect or abuse?	
4.	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? (If yes, explain below.)	

CAREFULLY READ THE FOLLOWING STATEMENTS BEFORE SIGNING

I, the undersigned, understand that:

A.	If volunteering 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.

В.	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 volunteer 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:

Signature of parent or guardian (if under age 18)

Date: _____

Date: _____