



Katahdin Scout Reservation • Camp Roosevelt
Application for Re-employment
 2018 Camp Season
 Katahdin Area Council • Boy Scouts of America



This form is for the use of Camp Staff returning from the 2017 season

The Katahdin Area Council, BSA requires that all employees are registered member of the Boy Scouts of America prior to their employment. All employees are required to obtain and wear the proper Boy Scout uniform during their employment.

APPLICANT DATA

Name _____

Current Mailing Address _____

City _____ State _____ Zip _____

Home Phone _____ Work Phone _____

Email address _____ Best time to call you at home? _____

Which age range will you fall into in summer 2018? 15 16-17 18-20 21+

Do you need any special accommodations? _____

Shirt Size: _____

Date available to begin work _____

Are you planning to work all summer? _____

If no, give date when leaving _____ Reason why? _____

Criminal Background Check

I understand that Katahdin Area council, BSA may conduct a criminal background check prior to my employment.

Signature of Applicant _____

Signature of Parent/Guardian if under 18 _____

Social Security Number _____



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Please indicated your re-employment preference

I would like to return to my previous position: Yes No

I would like to discuss the following alternate positions: None

Must be 21 years of age or older and may require certification

- | | | |
|---|--|--|
| <input type="checkbox"/> Camp Director | <input type="checkbox"/> Program Director | <input type="checkbox"/> COPE Director |
| <input type="checkbox"/> Shooting Sports Director | <input type="checkbox"/> Business Manager | <input type="checkbox"/> Climbing Director |
| <input type="checkbox"/> Rifle Shooting Instr. | <input type="checkbox"/> Provisional Scoutmaster | <input type="checkbox"/> Aquatics Director |
| <input type="checkbox"/> Shotgun Instructor | <input type="checkbox"/> C.I.T. Director | |

Must be 18 years of age or older

- | | | |
|--|--|--|
| <input type="checkbox"/> Handicraft Director | <input type="checkbox"/> Scoutcraft Director | <input type="checkbox"/> Nature Director |
| <input type="checkbox"/> Site Commissioner | <input type="checkbox"/> Trading Post Manager | <input type="checkbox"/> Asst. Provo Scoutmaster |
| <input type="checkbox"/> Dining Hall Steward | <input type="checkbox"/> Climbing Instructor | <input type="checkbox"/> Cope Instructor |
| <input type="checkbox"/> Archery Director | <input type="checkbox"/> Asst. Aquatics Director | <input type="checkbox"/> Quartermaster |
| <input type="checkbox"/> Camp Commissioner | <input type="checkbox"/> Field Sports Director | |

Must be 16 years of age or older

- | | | |
|--|--|---|
| <input type="checkbox"/> COPE Instructor-in-Training | <input type="checkbox"/> Shooting Sports Staff | <input type="checkbox"/> Office Manager |
| <input type="checkbox"/> Climbing Instructor-in-Training | <input type="checkbox"/> Aquatics Instr. | |

Must be 15 years of age or older

- | | | |
|--|---|--|
| <input type="checkbox"/> Handicraft Instructor | <input type="checkbox"/> Nature Instructor | <input type="checkbox"/> Trading Post Staff |
| <input type="checkbox"/> Scoutcraft Instructor | <input type="checkbox"/> New Scout Instructor | <input type="checkbox"/> Field Sports Instr. |



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CERTIFICATIONS/LICENSES

Please indicate if you hold any of the following training/certifications and their expirations.

- _____ Red Cross First Aid/CPR
- _____ Red Cross Basic Lifeguard
- _____ Red Cross Water Safety Training
- _____ Red Cross Wilderness First Aid
- _____ Red Cross Lifeguard
- _____ Red Cross Emergency Response
- _____ Other CPR/First Aid & Name of Organization _____
- _____ BSA Lifeguard
- _____ EMT (B or I)
- _____ NRA Range Officer
- _____ Registered Maine Guide
- _____ NRA Instructor
- _____ National Archery Assoc Instructor
- _____ USA Archery Instructor
- _____ Other _____

Have you attended BSA National Camp School? _____ If yes, give section and
 Expiration date _____

List any current certifications/licenses that you have earned (*Include expiration dates*) _____

Have you completed the following BSA training/programs? (Check all that apply):

- _____ NYLT _____ NAYLE _____ Kodiak _____ Woodbadge _____ Powderhorn
- _____ Project C.O.P.E _____ Other; Please Specify: _____

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision. I authorize all my previous employers, schools, and all other references to furnish the information requested. I hereby declare that the information provided by me in this application for employment is accurate and complete to the best of my knowledge. I understand that any falsification or misrepresentation in this application is cause for discharge.

Signature of Applicant _____ Date _____

Signature of Parent/Guardian _____ Date _____