

For Office use only:
Date received _____

CAMP STAFF APPLICATION 2008 CAMP SOL MAYER

Thank you for your interest in serving on the summer staff at Camp Sol Mayer.
Please fill out this application thoroughly and neatly and return by March 1, 2008 to:

Concho Valley Council
2008 Camp Staff Application
P.O. Box 1584
San Angelo, TX 76902-1584

Camp Sol Mayer Staff week: Mon., June 2 to Sat., June 7
First week of camp: June 8 - June 14
Second week of camp: June 15 - June 21
Third week of camp: June 22 - June 28
Staff is released on Sunday, June 29

APPLICATION DEADLINE: MARCH 1, 2008

Personal Information

Age 18+ yes no

Name _____ If not 18+, age as of June 1, 2008 _____

Address _____

City _____ State _____ Zip _____

Phone number _____ EMAIL ADDRESS _____

Position(s) desired (check)

+Note: Must be required age by June 1, 2008

Minimum age 21 or Over+

- Aquatics Director*
- Camp Chef (2)
- Shooting Sports Director*
- Ranch Adventure Director
- Climbing Director*

Minimum Age 18 or Over+

- Trailblazer Director
- Health Officer**/First Aid MB
- Waterfront Director
- Camp Commissioner
- Ranch Adventure Assistant
- Trading Post Manager

Merit Badge Counselor/Program Assistant

- Trailblazer Assistant (3)
- Arts (Basketry, Leatherwork, Woodcarving)
- Shooting Sports Assistant
- Dining Hall Assistant (4)
- Swimming Pool Assistant (3)
- Waterfront Assistant
- Skills (Orienteering/Pioneering/Wilderness Survival)
- Climbing Assistant
- Science (Bird Study, Insect Study, Mammal Study)

*Requires National Camp School Certification

**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.

Have you every been convicted of a felony? (You may answer NO if your conviction was ordered sealed, expunged or eradicated.)

Yes No

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 _____

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Scouting and Program Background

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

If yes give:

Location _____ Date: _____ Expiration date of card _____

Check type of certificate: ___ Shooting Sports ___ Aquatics
 ___ Climbing Director ___ Commissioner

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

Unit number _____ Position _____ Rank (if youth member) _____ Council _____

Current Unit Leader _____ Phone _____ Email _____

Have you previously worked at summer camp?

Year _____ Camp _____ Position _____ Salary _____ /per week

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

Expiration Date

LEADERSHIP COURSES: (example--JLT)

Date Attended

LIST WHERE YOU LAST ATTENDED SUMMER CAMP

Date Attended

LIST COUNCIL EVENTS WHERE YOU HAVE BEEN A STAFF MEMBER:

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

Order of the Arrow: Ordeal _____ Brotherhood _____ Vigil _____

Educational Background:

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Name and Location of High School _____ Dates of enrollment _____

Name and Location of College _____ Course of Study _____

REFERENCES (please do not list family members; Scouting members should include one unit leader)

1. Name _____ address _____

Phone _____ Relationship _____ Length of time he/she has known you _____

2. Name _____ address _____

Phone _____ Relationship _____ Length of time he/she has known you _____

3. Name _____ address _____

Phone _____ Relationship _____ Length of time he/she has known you _____

EMPLOYMENT INFORMATION (please list most recent employer first)

1. Employer: _____ Nature of Job _____

Dates Employed _____ Reason for leaving _____

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Please 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.

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 prior to the beginning of camp.

I am/will be a registered member of the Boy Scouts of America.

I understand that I must have a complete Class A uniform (shirt and shorts)

with proper placement of all patches.

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.

APPLICANT'S SIGNATURE _____ DATE _____

If under 18, Parent or Guardian approval _____ Date _____