



# 2019 CAMP STAFF APPLICATION

## RESIDENT AND DAY CAMPS

**THEODORE ROOSEVELT COUNCIL BSA**  
 ph 516 797-7600    fx 516 797-9765    inquiry@trobsa.org

Please read **CAREFULLY** and then **type or print**, including the names, complete addresses and phone numbers of references. **Background checks will be done on all personnel in compliance with NYS law.** Applications are not required to give any information on this form that is prohibited by Federal, State, or Local Law. Applicants are considered for positions without regard to race, color, religion, sex, national origin, age (over minimum), marital status, veteran status, or the presence of a health problem or handicap that is unrelated to your ability to perform the required job functions. **INCOMPLETE APPLICATIONS WILL NOT BE CONSIDERED.**

**Applying for** (check as appropriate):     ONTEORASR     SCHIFFSR     PAID STAFF     VOLUNTEER STAFF

First Name: \_\_\_\_\_ MI: \_\_\_\_\_ Last Name: \_\_\_\_\_ Phone: CELL (\_\_\_\_) \_\_\_\_ - \_\_\_\_\_

Street Address: \_\_\_\_\_ Email: \_\_\_\_\_@\_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Applicant's Date of Birth: \_\_\_\_\_

School Attending: \_\_\_\_\_ Grade in School (if under 18): \_\_\_\_\_  Over 18  Over 21

Parent / Guardian: \_\_\_\_\_ Contact: RES (\_\_\_\_) \_\_\_\_ - \_\_\_\_\_ CELL (\_\_\_\_) \_\_\_\_ - \_\_\_\_\_

**Top 3 Position Choices** (see position list on reverse)

1. \_\_\_\_\_ 2. \_\_\_\_\_ 3. \_\_\_\_\_

**Scouting Experience:**

Were/are you a: (mark all that apply):  Cub Scout  Boy Scout  Explorer  Venturer  Adult Leader

Current Registration(s) (unit, #, community): \_\_\_\_\_

\_\_\_\_\_ Youth Rank Achieved: \_\_\_\_\_

\_\_\_\_\_ Adult Positions Held: \_\_\_\_\_

OA Level: \_\_\_\_\_ OA Committees Held: \_\_\_\_\_  High Adventure  NOAC  NAT/World Jambo

Mark all you will be attending this summer:  \_\_\_\_\_ Philmont  \_\_\_\_\_ Northern Tier  \_\_\_\_\_ Sea Base  \_\_\_\_\_ NAT/World Jambo

Certification & Expirations/Awards:  Lifeguard BSA/Red Cross  CPR  Other: \_\_\_\_\_

**Summer Camps Attended:**

1. Camp: \_\_\_\_\_  As a Youth  As a Leader Number of Years \_\_\_\_\_

2. Camp: \_\_\_\_\_  As a Youth  As a Leader Number of Years \_\_\_\_\_

3. Camp: \_\_\_\_\_  As a Youth  As a Leader Number of Years \_\_\_\_\_

**Staff Experience:**

1. Camp: \_\_\_\_\_ Position: \_\_\_\_\_ Salary: \_\_\_\_\_

2. Camp: \_\_\_\_\_ Position: \_\_\_\_\_ Salary: \_\_\_\_\_

3. Camp: \_\_\_\_\_ Position: \_\_\_\_\_ Salary: \_\_\_\_\_

**REFERENCES (NON-FAMILY):**

Unit Leader: \_\_\_\_\_

Day Time Phone Number: (\_\_\_\_) \_\_\_\_ - \_\_\_\_\_ Evening Phone Number: (\_\_\_\_) \_\_\_\_ - \_\_\_\_\_

Relationship: \_\_\_\_\_ Length of time they have known you: \_\_\_\_\_

Name: \_\_\_\_\_

Day Time Phone Number: (\_\_\_\_) \_\_\_\_ - \_\_\_\_\_ Evening Phone Number: (\_\_\_\_) \_\_\_\_ - \_\_\_\_\_

Relationship: \_\_\_\_\_ Length of time they have known you: \_\_\_\_\_

Name: \_\_\_\_\_

Day Time Phone Number: (\_\_\_\_) \_\_\_\_ - \_\_\_\_\_ Evening Phone Number: (\_\_\_\_) \_\_\_\_ - \_\_\_\_\_

Relationship: \_\_\_\_\_ Length of time they have known you: \_\_\_\_\_

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Have you ever been convicted of a felony? (You may answer no if your conviction has been ordered sealed, expunged, or eradicated) If yes, please provide complete information about the conviction by attaching a separate statement		(YES, NO)	
Are you permitted to become lawfully employed in this country? (Proof of citizenship or immigration status will be required upon employment)		(YES, NO)	
Have you ever been charged with neglect or abuse of a child or animal?		(YES, NO)	
Has your Driver's License ever been suspended or revoked?		(YES, NO)	
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)	
Any reason that I would have difficulty performing any of the essential elements of the job for which I am applying are listed below, <input type="checkbox"/> No Reason <input type="checkbox"/> Reasons: _____			
List any Computer Skills: _____			
Do you play a musical instrument? (YES / NO) Instrument(s): _____			
<b>Position List</b>			
Aquatics Director** Aquatics Ass't Director* Aquatics Staff Archery Director* Archery Staff ATV Director** ATV Staff* <b>Business Manager**</b> Camp Director (25+)** Camp Commissioner* Communications Director* Communications Staff <b>Marketing Director*</b>	Climbing Director** Climbing Staff* Craft Lodge Director* Craft Lodge Staff Dan Beard Director* Dan Beard Staff Dining Hall Steward Dining Hall Staff Field Sports Director* Field Sports Staff Front of House Mgr* Glaise Director* Glaise Staff	Health Officer (EMT+)** Health Lodge Staff (EMT+)* Health & Safety Director* Health & Safety Staff Maintenance Director** Maintenance Staff* Nature/Conserv. Director* Nature/Conserv. Staff Older Scout Director* Older Scout Staff Office Clerk* Paintball Director * Paintball Staff	Program Director** Program Ass't Director* Program Specialist* Provisional Director** <b>Services Director**</b> STEM Director* STEM Staff Scout Craft Director* Scout Craft Staff Shooting Sports Director** Shooting Sports Staff Trading Post Manager* Trading Post Staff
* Indicates that Applicant must be 18 years as of employment		** Indicates that Applicant must be 21 years of employment	

### Applicant's Statement

On my honor as a Scout, I promise that I will faithfully live according to the Scout Oath and Law during Camp and thereafter. I will represent my unit with honor and take personal responsibility for my application, conduct at camp, and all pre-requisite training prior to camp as directed by Theodore Roosevelt Council, BSA. I will participate in Youth Protection training prior to employment through pre-camp training and must follow the guidelines therein. I am in good physical condition and if employed, will provide an up-to-date physical examination, at my own expense. Any conditions that effect employment or training availability dates must be identified at the time of the interview and will be handled on a case by case basis.

I agree to obtain an official Boy Scout Uniform, and will be willing and expected to work hard in my position or in other assignments as required by the Camp Director. If selected, the BSA can expect my loyalty to council policies, council & camp management, and programs and my full cooperation with other members of the staff. I will serve to the best of my ability for the entire camping season in the position to which I am assigned. I acknowledge that if I disrupt the administration of the camp I will be discharged at the discretion of the camp director. All Resident Camp Applicants should be prepared to work the full summer.

**I also understand that misrepresentation or falsification herein or in other documents completed or submitted by the applicant will result in dismissal, regardless of the date of discover by the camp.**

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

Parent's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

(If Applicant is under 18)

**You may attach additional documentation that you believe would represent you well in an employment decision**

When complete, mail to the Council Service Center:

**Theodore Roosevelt Council, BSA  
 Camp Staff Application  
 544 Broadway  
 Massapequa, NY 11758**