



Camp George Thomas

Last Frontier Council Application for Employment - Seasonal Camp Staff

An Equal Opportunity Employer

The Last Frontier Council, Boy Scouts of America, is an equal opportunity employer. The Last Frontier Council does not discriminate in employment on account of race, color, religion, national origin, citizenship status, ancestry, age, sex, sexual orientation, marital status, physical disability, military status, or unfavorable discharge from military service.

In accordance with Boy Scouts of America qualifications and requirements, I hereby subscribe to the Scout Oath or Promise, Law, and the declaration of religious principle. I agree to abide by the Charter, Bylaws, and Rules and Regulations of the Boy Scouts of America.

Applicants are not required to give any information on this form that is prohibited by federal, state, or local law.

All camp staff members must be registered members of the Boy Scouts of America and must fill out all the required paperwork after getting hired to start working.

PLEASE PRINT CLEARLY:

Name: _____ Preferred Name: _____
FIRST MIDDLE LAST SUFFIX

Address: _____

City: _____ State: _____ ZIP: _____

Telephone: _____ Email: _____

Alternate Address: _____

City: _____ State: _____ ZIP: _____

Alternate Phone number: _____ Best time to call: _____

Age 18 or older? Yes No

Relative employed by the council? Yes No

Have you been previously employed by the BSA? If relative employed, name: _____

Yes No If yes, council name and camp: _____

EDUCATION:

Highest degree OR current year of school: _____

GPA: _____ Graduated: Yes No

Major: _____

School: _____ Location: _____

LICENSES AND CERTIFICATIONS: (Attach information about other licenses or certifications on a separate sheet.)

License or Certificate: _____

Issue Date: _____ License No. (if applicable): _____

Issued by: _____

State/Country: _____ Expiration Date: _____

SPECIALIZED SKILLS AND TRAINING: (List all skills and training applicable to camp staff.)

Name: _____
LAST FIRST MI

SCOUTING EXPERIENCE (Not mandatory for employment)

Number of Years as: Youth: _____ Adult: _____

Council: _____ Unit: _____

Current Position: _____ Other Positions Held: _____

Highest Youth Rank: _____

Achievements: _____

Special Training Completed: _____

PRIOR WORK EXPERIENCE

Include any employment prior to today's date, even if that employment has not ended. For more than two employers, submit the information in the same format on another sheet. Include military experience as if an employer, including branch, rank, and date of discharge. Include past summer camp experience as well.

Last/Current Employer: _____ May we contact your current employer? Yes No

Address: _____

City: _____ State: _____ ZIP: _____

Supervisor's name: _____ Phone: _____

Start Date: _____ End date: _____ Ending Position or Rank: _____

Reason for Leaving*: _____

Previous Employer: _____

Address: _____

City: _____ State: _____ ZIP: _____

Supervisor's name: _____ Phone: _____

Start Date: _____ End date: _____ Ending Position or Rank: _____

Reason for Leaving*: _____

*Have you ever been terminated or asked to resign from any job? _____ If so, give details on a separate sheet.

REFERENCES

New applicants should submit three references, not related to you, one from each category listed below. Please have each reference complete a Camp Staff Reference Form and return it to the Council address provided.

1. **Adult member of Scouting unit, college official or current employer:**
2. **Community organization leader or past employer:**
3. **Teacher, supervisor, or associate:**

Name	Phone & Email	Company/Organization	Years Acquainted
1.			
2.			
3.			

