

INTERNATIONAL CAMP STAFF PROGRAM APPLICATION

(Please type or print in black ink in duplicate.)

Please complete all information requested on application.

Submitted through Scout association of _____ Country _____

PERSONAL DATA Single Married Divorced Male Female

Name _____
Last (family name) First Middle

Home address _____
Street/Box number City/Town/Province

Post Code _____ Country _____

Citizen of _____ Country _____ Passport no. _____

Telephone no. _____ Fax no. _____

E-mail _____

Place of birth _____
City Country

Native language _____ Religion _____

Age _____ Height _____ Weight _____

Name that I would like to be called: _____ Birth date _____

Speaking ability in English: good excellent Can you swim? _____

In case of emergency, contact: Name _____

Address _____ Telephone _____

SCOUT RECORD

Present Scouting appointment or responsibility _____

Scout awards and recognitions _____

Years of service: Scout _____ Venturer _____ Rover _____ Adult _____

Scouter training completed _____ Wood Badge _____

CAMP SKILLS

I feel I can help instruct in the following areas: (Check all that you feel you can help in.)

Leadership	Fishing _____	Survival skills _____	Photography _____	Lifesaving _____
Campfires _____	Hiking _____	Program	Riflery _____	Rowing _____
Counseling _____	Horseback riding _____	Archery _____	Song leading _____	Sailing _____
Public relations _____	Nature/ecology _____	Arts and crafts _____	Sports _____	Scuba _____
Training _____	Orienteering _____	First aid _____	Storytelling _____	Snorkeling _____
Troop leadership _____	Outdoor cooking _____	Ham radio _____	Woodcarving _____	Swimming _____
Scoutcraft	Pioneering _____	Knots _____	Waterfront	Waterskiing _____
Backpacking _____	Rappelling _____	Leatherwork _____	Canoeing _____	Windsurfing _____
Camping _____	Rock climbing _____			

Other special skills _____

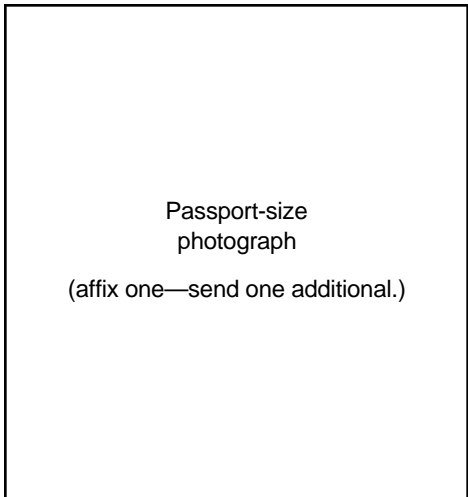
Activities certification or qualification (First Aid, Water Safety, Scuba, etc.) _____

Musical instrument played _____

AVAILABILITY

Please indicate dates you can be available to work in camp. **Camps begin between the first week and last week of June and will last from 8 to 11 weeks. We are not able to place anyone who is not able to arrive by June 15.**

Available dates: from _____ to _____ Maximum time available to work in camp: _____ weeks



EDUCATION

Highest level of school completed _____

Date _____

Fields of study _____

Currently full-time student at _____

EMPLOYMENT (You must specify whether you are a student or are working. If employed, name your specific job.)

Present employer: Name _____

Address _____

Employed as _____
Job

HEALTH

Are you now in sound health, without physical or mental defects? yes no

If no, explain _____

Required health and medical form to be completed and enclosed with this application.

YOUTH LEADER EXPERIENCE

Describe past experiences where you have supervised children (camp/Scout leader, teacher, church leader, day care provider, etc.).

ADDITIONAL INFORMATION

How many times have you entered the United States on a J-1 visa? _____

Do you use illegal drugs? _____

Have you ever been convicted of a criminal offense? _____ (If yes, explain on a separate piece of paper.)

Have you ever been charged with child neglect or child abuse? _____

Other than the situations mentioned 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 on a separate piece of paper.)

BSA POLICY

The Boy Scouts of America is deeply concerned about the welfare of youth placed in its care. Child abuse and substance abuse are absolutely prohibited. If there is any evidence that a staff member is involved in either practice, the appropriate authorities will be notified immediately.

STATEMENT

On a separate piece of paper, submit a personally written statement, in English, giving your reasons for wanting to become a part of the International Camp Staff Program and listing the experience and skills you feel you can contribute to the program. Include a description from your own experience in which you resolved a problem involving a child or a group of children.

AGREEMENT

I understand that this application includes my request for personal health and accident insurance to be provided on my behalf by the BSA. If I am selected, the Boy Scouts of America can expect my loyalty and full cooperation at all times while I am on assignment in the United States. I understand that every effort will be made to find a camp assignment if this application is accepted, but that the BSA cannot guarantee placement.

Signature of applicant _____ Date _____

REFERENCES

References from two people who know you well are required. Please use the pages marked A and B, which are a part of this application, for these references.

REFERENCE FROM A LOCAL SCOUTING LEADER

Please rate the applicant on these aspects:

Exceptional Good Fair

Physical health _____

Mental alertness, imagination, judgment _____

Follows the Scout Oath and Law _____

As a leader, shows respect for youth and adults _____

Enthusiastic and skilled in Scoutcraft _____

Adaptable to a new culture and a BSA camp _____

How long have you known the applicant? _____

How did you come to know the applicant? _____

How would you describe the applicant's personal character? _____

How does the applicant relate to children? _____

Are there any problems or conditions that would interfere with the applicant's ability to care for children or that would in any way endanger the children under the applicant's care? These problems could include a criminal record, substance abuse, mental or emotional illness, or history of child abuse.

Signed _____ Scouter's position _____ Date _____

Please print name _____

Address _____
Telephone no. _____

REFERENCE FROM CHURCH, COMMUNITY, OR SCHOOL

How long have you known the applicant? _____

How did you come to know the applicant? _____

How would you describe the applicant's personal character? _____

How does the applicant relate to children? _____

Are there any problems or conditions that would interfere with the applicant's ability to care for children or that would in any way endanger the children under the applicant's care? These problems could include a criminal record, substance abuse, mental or emotional illness, or history of child abuse.

Signed _____ Position _____ Date _____

Please print name _____

Address _____ Telephone no. _____

Association Approval

Signed _____ Position _____ Date _____

Remarks



INTERNATIONAL CAMP STAFF PROGRAM

Staff Statement of Understanding and Code of Conduct

Statement of Understanding: All adult staff participants are selected to represent their Scout association based on their qualifications in character, camping skills, physical and personal fitness, and leadership qualities. Therefore, all adult staff members are asked to sign the Statement of Understanding and Code of Conduct as a condition of participation, with the further understanding that serious misconduct or infraction of established rules and regulations may result in expulsion, at the participant's expense, from the camp. Ultimately we want each staff member to be responsible for his or her own behavior, and only when necessary will the procedure be invoked to send a staff member home from the camp staff employment.

All adult staff members are expected to abide by the Code of Conduct as follows:

1. I will set a good example by keeping myself neatly dressed and presentable. (The official Scout uniform unless your job requires variance.)
2. I will attend all scheduled programs and participate as required in cooperation with other staff members and staff leadership.
3. In consideration of other camp staff members, I agree to follow the schedules of the camp, or as directed for my job.
4. I will be responsible for keeping my quarters and personal gear labeled, clean, and neat. I will adhere to all camp recycling policies and regulations. I will do my share to prevent littering of the campgrounds.
5. I understand that the purchase, possession, and consumption of alcoholic beverages or illegal drugs by any youth and adult members are prohibited. This standard shall apply to all camp staff and adult staff members.
6. Serious and/or repetitive violations by staff, including use of tobacco, alcohol, and drugs, and cheating, stealing, dishonesty, swearing, fighting, and cursing may result in expulsion from camp staff or serious disciplinary action and loss of privileges.
7. I understand that gambling of any form is prohibited.
8. I understand that possession and detonation of fireworks are prohibited.
9. I will demonstrate respect for camp property and be personally responsible for any loss, breakage, or vandalism of property as a result of my actions.
10. Neither the camp director, nor the BSA local council will be responsible for loss, breakage, or theft of my personal items. I will label all my personal items and check items of value at the direction of staff leaders. Theft will be grounds for termination.
11. While working in my camp staff job, and other activities, I will obey the safety rules and instructions of all supervisors and camp staff leaders.
12. Camp staff members are prohibited from having firearms, ammunition, and weapons in possession in accordance with federal, state, and local laws.
13. Camp staff members will be guided by the Scout Oath and Scout Law and will obey all federal, state, and local laws.
14. All camp staff members must receive Youth Protection training prior to employment through precamp training and must follow the guidelines therein.
15. Hazing has no place in Scouting; nor does running the gauntlet, belt lines, or similar physical punishment. Leaders and older youth must prevent all youth from being "initiated" into the group with a hazing activity.
16. Adult staff members should have the good judgment to avoid trading souvenirs or patches with a child or youth member in Scouting. Youth members may trade with other youth members. Adult staff members may trade only with other adults 18 years of age or older.
17. Camp staff members must avoid confrontation with groups, demonstrators, visitors, or hecklers, and must assume a passive reaction to name-calling from individuals or groups.

I certify I have read the **Statement of Understanding** and agree to abide by the conditions in the **Code of Conduct** as a counselor in the International Camp Staff program of the Boy Scouts of America.

Signature of counselor _____ Date _____