CAMP CROOKED CREEK STAFF, CIT AND "STAR" STAFFER APPLICATION

AN EQUAL OPPORTUNITY EMPLOYER

Applicants are not required to give information on this form that is prohibited by Federal, State or Local Law. This application will be given every consideration, but its receipt does not imply that the applicant will be employed. Applicants accepted for employment are on a trial basis with a probationary period and if, in our judgment, it is found misrepresented, the engagement may be terminated without other reason. In connection with your application for employment, an investigation may be made requesting information as to character, general reputation, personal characteristics and mode of living. Fill out the application completely.

CHECK THE APPROPRIATE BOXES: A recent photo should be attached if applying for Camp Staff or CIT. Applying for: Staff Member (16 & older) Counselor in Training (CIT) (15 & older) STAR Staffer (Exception: 15 year olds who worked as CIT at CCC during 04 may apply as a staff member.) (*Star staffer is registered leader who can assist during their week at camp. STAR Staffer only complete sections I, II and V.)					
PLEASE PRINT:	Date of Application:				
Section I: Personal Information					
Name:					
Last	First	Mido	dle		
Address:					
City:	State:		Zip:		
Home Phone #:	Work/School #:				
1-snirt Size:	Age of June 1st:				
Date of Birth:	Condition of Health:				
Physical Limitations:					
Physical Limitations:(As a conditi	on of employment, applicants m	ust have a medic	cal examination.)		
Social Security #:	Drivers License #		State:		
Section II: Work/School Experienc	Dirvers License # a/Specialized Training		State		
Most Current Work Experience:	e/Specialized Training	Dates:			
Wigh School:	Lagation	Dates	Data		
Most Current Work Experience: High School: College:	Location:	Major	Date		
Doct College Schooling:	Location	Major	Date		
Post College Schooling:		•			
Technical/Vocational:					
Other Special Training.					
Extra-Curricular.					
Leadership Positions most proud of:					
Give Dates of Following (if applical					
Red Cross Lifesaving:	Jr. Red Cross Lifesaving:				
NRA Instructor:	Cope Training: Which Association: (Red Cross, American Heart, etc):				
CPR Training:	Which Association: (Red Cross, American Heart, etc):				
Red Cross Water Safety Instructor: Other:	Instructor Aide:				
Section III: Scouting Experience					
Number of Years in Scouting:	Last Rank:				
Current Registration: Council:	District:		Unit #:		
Leadership Positions Held:					
Camp Staff Positions previously held					
1. Camp:	Position:		Year:		
2. Camp:	Position:		Year:		
3. Other:		-			
Please List Experience & Dates:					
High Adventure Base:	Jamboree	g:			
Order of the Arrow: Ordeal:	Brotherhood:		Vigil:		

National BSA Camp School:	BSA Junior Leader Training:				
BSA Lifeguard:					
Scout Leader Training:	Wood Badge:				
Other:					
Merit Badges I am comfortable teaching:					
If you are still registered in a Scout Troop, v					
Name: Phone # (H):	Address:				
Unit #: Phone # (H):	Phone # (W):				
Leader's Signature:					
Section IV: References & Emergency Con					
REFERENCES: (Adults, not parents or rela	tives) including previous employer.				
1. Name:	Phone #:				
Address:	City:	State:	Zip:		
Address: 2. Name: Address:	Phone #:				
Address:	City:	State:	Zip:		
Emergency Contact:			1 <u></u>		
1. Name:	Relationship:				
Phone #:	Alternate Phone#:				
Address:	City:	State:	Zip:		
2. Name:	Relationship:		1 <u></u>		
Phone #:	Alternate Phone#:				
Phone #: Address:	City:	State:	Zip:		
Section V: Camp Position Request: (If kn Department	own)				
1st. Choice:	Position:				
2nd. Choice:	Position:				
3rd. Choice:					
I would be an excellent asset to Camp Crool	ked Creek Staff because				
It is assumed that all camp staff applicants vindicate dates and reason if you must miss a	•	-	•		
Conditions that effect employment availability dates (Philmo school, football, military reserve, etc.) must be identified at t		n, Jamboree, National Oro	der of the Arrow Conference		
If selected, the Boy Scouts of America can expect my loyalty will serve to the best of my ability for the entire camping sea up-to-date physical examination, at my own expense. I agree	son in the position, which I am assigned. I am in goo				
Applicant's Signature:	Date:				
D 4 6					
Parent's Signature:(Fo	r applicants under 18 years of age)				

RETURN YOUR COMPLETED APPLICATION TO: SUMMER CAMP DIRECTOR P.O. BOX 36273 LOUISVILLE, KY 40233-6273