



2019 Resident Camp Staff Application Western Massachusetts Council, BSA



Name _____
Last First Middle

Address _____
Street Apt City State/Zip

Home Phone _____ Cell Phone _____

Email _____

Are you over 21 years of age? **YES** **NO**

If no, what will your age be on July 1, 2019 _____

The available positions for camp are listed in the **Summer Camp Staff Job Descriptions** document available on the Summer Camp page of the Western Mass Council website

List the top four positions in which you would like to serve.

1. _____ 2. _____
3. _____ 4. _____

Current Level of Education

High School Graduation Year _____ or current High School Grade _____

College Graduation Year _____ or current College Year _____

College Major _____

Training and Scouting Experience

Highest Scouts BSA, Venturing or Girl Scout rank attained _____

Troop or Crew # _____

Have you attended National Youth Leadership Training or Wood Badge? **YES** **NO**

NYLT Year _____ Wood Badge Year _____

Other current certifications (First Aid, CPR, EMT) _____

Camp Experience

Camper _____

Staff _____

References

Three letters of reference are required as a condition of employment. Your references may use the attached form or write a personal letter. If you are a member of a Troop or Crew, it is recommended that one of your references be from your unit leader. Please list your references below:

1. _____
2. _____
3. _____

Applicant Statement

I understand that the term of employment is from June 30 to August 3, 2019.

Mandatory staff meetings:

- Kick-off staff meeting on Sunday April 14 (at Saint Patrick’s Social Center in South Hadley)
- Staff training weekend on May 3-4 (Moses Scout Reservation)
- Staff training day on Saturday June 15 (EPI Center)

I understand all applicants must undergo a criminal background check.

I understand my appointment to a position is not binding until all paperwork is completed and that my position may be given to another, equally qualified individual in the event they have handed in the required paperwork before I have completed and turned in my own in a timely manner.

Signature of Applicant

Signature of Parent or Guardian (If under 18)

This application should be dropped off, mailed or faxed to:

Western Mass Council
Attention: Resident Camp Staff Applications
1 Arch Road, Suite 5
Westfield, MA 01085
Fax: (413) 562-1041, Office: (413) 594-9196, Toll-Free: (800) 649-1735

Resident Camp Staff Applicant
Letter of Reference
Western Massachusetts Council BSA

(Applicant's Name) _____ has applied for a summer camp staff position with the Western Mass Council, Boy Scouts of America. We would appreciate your careful consideration of this person as a potential childcare worker. We ask that you take the time to complete this form and return it within 7 days of receipt, so we may proceed with the applicant's file. Please do not complete this form if you are related to the applicant.

How long have you known the applicant?

1-3 years ____ 3-5 years ____ more than 5 years ____

In what capacity?

CHECK ONE

PERFORMANCE AREAS	EXCELLENT	GOOD	FAIR	POOR
1. Work with children in a group living situation and serve as a positive role model.				
2. Ability and history of being punctual, clean and prepared for assigned duties.				
3. Fulfill all responsibilities & be self-motivated to do so.				
4. Get along with other staff - contribute to the well-being of the camp community.				

What strengths and weaknesses do you believe this person may have in working with children in a camp setting?

Would you hire this person to care for your own children?

How would you describe this person's character?

Please provide any additional information you feel may be helpful in considering this applicant.

APPLICANT AUTHORIZATION FOR RELEASE OF INFORMATION

References are to be requested only from adults to whom you are not related.

I, (applicant: print your full name) _____ request and authorize you to furnish to Western Mass Council, Boy Scouts of America any and all information concerning my employment record, school record, medical record, criminal record, and me. Please include any and all information of a confidential or privileged nature if it is requested. This information is used to assist the Boy Scouts of America in determining my qualifications and fitness for the position I am seeking.

I hereby release you, your organization or others from any liability or damage, which may result from furnishing the information requested.

Applicant's Signature _____ Date _____

REFERENCE PROVIDER'S INFORMATION ONLY – please write clearly

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Signature _____ Date _____

Daytime Phone: _____ Evening Phone: _____

E-Mail: _____

This letter of reference should be mailed or faxed to:

Western Mass Council
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Westfield, MA 01085
Fax: (413) 562-1041, Office: (413) 594-9196, Toll-Free: (800) 649-1735