

Name _____

**"YOU'RE INVITED TO SERVE"
JR. STAFF
SUMMER CAMPS**

**SAM HOUSTON AREA COUNCIL
BOY SCOUTS OF AMERICA**



**PUT YOURSELF IN
THE CAMP STAFF
PICTURE**

A recent picture may accompany this application.

DEAR SCOUT:

This is an invitation for you to consider serving as a Junior Staff member (Summer Camp Staff - In Training Counselor Program) of the Sam Houston Area Council.

REQUIREMENTS TO SERVE:

- 1. Be a registered member of the Boy Scouts of America.
- 2. 15 years of age during Summer Camping Season (June - August)
- 3. Star Scout.
- 4. Able to serve for a 2 week period.
- 5. Complete and return the I-9 Form (complete with copies of acceptable ID's) with application.
- 6. Have Scoutmaster complete and forward to Camping Services separately the "Scoutmaster Appraisal".
- 7. Copy of Social Security Card (Mandatory)
- 8. Submit a copy of the Talent Release Form
- 9. Sign & submit staff statement of Understanding & Code of Conduct (Mandatory)

You will be working with members of the Camp Staff, who will coach you as you learn on the job. You will receive training in one or more of the Camp Program areas such as: Aquatics, Field Sports, Scoutcraft, Food Service, Ecology, Handicraft and Administrative duties. Your main job, no matter where assigned, will be to help Campers carry out a program of fun and adventure while in camp. Your time commitment may be from 2 - 4 weeks or you may be employed as a full time Jr. Staff member without salary, but with room/board. This opportunity will be profitable to you, in terms of personal growth and advancement in Scouting as well as provide you a Camp Staff experience.

If you wish to be considered for participation in this program, complete this application and return to:

**PROGRAM SERVICES
Sam Houston Area Council, B.S.A.
P. O. Box 924528
Houston, TX 77292-4528**

DEADLINE for receiving application is April 1st. You will be notified of a mandatory Jr. Staff Orientation Training. Your assignment with a Jr. Staff agreement will be made after the orientation and training program.

AN EQUAL OPPORTUNITY EMPLOYER

Applicants are not required to give any 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 accepted. Applicants accepted for Jr. Staff are on a trial basis with a probationary period and if, in our judgment, it is found during this period that the Jr. Staff is not adapted to the work assigned, or that information given has been misrepresented, the engagement may be terminated without other reason. In connection with your application for Jr. Staff, an investigation may be made requesting information as to character, general reputation, personal characteristics and mode of living.

*** FOR OFFICE USE ONLY ***

RECEIVED	CAMP	POSITION	SALARY	AGE
REFERENCE CHECK: WHO:		DATE:		

Jr. Staff Application

An Equal Opportunity Employer

Applicants are not required to give any 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 during this time period that the employee is not adapted to the work assigned, or that information given has been 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.

Name _____ Date of Application _____

(Print in Full) Last First Middle I
 Permanent Address _____ How long _____

City _____ State _____ Zip _____ Best Time & # to call you

Home # () _____ Bus # () _____

E Mail Address _____

Height _____ Weight _____ Age Today _____ As of June 1, AT CAMP TIME I'll be _____

Date of Birth _____ T-shirt Size _____

Are you legally eligible for employment in this country - [] YES --[] NO (Proof of U.S. Citizenship or immigration status will be required upon employment.)

Name as printed on your Social Security Card: _____

Your Social Security No. _____ Drivers License No. _____ State _____

If you have a Texas address, you must have a Texas license.

Unit now registered in: Unit # _____ District _____ Position _____ Rank _____

Please indicate your 1st, 2nd and 3rd choice of camp preference and 1st, 2nd, and 3rd choice of starting date for your 2 week service. Please check other dates you would be available if requested to remain on staff. Remember, you must work 2 weeks Jr. Staff before a full staff position may be offered. .LINE through any weeks you are not available.

El Rancho Cima
 River Camp
 7 Sessions

- ___ June 8-14
- ___ June 15-21
- ___ June 22-28
- ___ June 29-July 5
- ___ July 6-12
- ___ July 13-19
- ___ July 20-26

El Rancho Cima
 Horseshoe Bend
 5 Sessions

- ___ June 8-14
- ___ June 15-21
- ___ June 22-28
- ___ June 29-July 5
- ___ July 6-12
- ___ July 13-19

Bovay Scout Ranch
 Cub Resident Camp
 3 Sessions

- ___ July 24-26
- ___ July 27-29
- ___ July 31-Aug 2
- ___ Aug 3-5
- ___ Aug 7-9

Date Submitted: _____ Applicant's Signature: _____

Name and Phone # of persons to contact in an emergency: _____

Parent or Guardian's Approval & Signature: _____

Unit Leader's Approval **REQUIRED**: Signed _____
 (Scoutmaster/Varsity Team Coach/Venture Advisor)

Address: _____

City/State/Zip: _____

Leader's Phone No: (H) [] _____ (B) [] _____

PLEASE PRINT LEGIBLY

PERSONAL EVALUATION

With 1 as the lowest and poorest and 7 as the highest and best, please complete the following:

A. PROMPTNESS	1	2	3	4	5	6	7	
B. FOLLOW INSTRUCTIONS	1	2	3	4	5	6	7	
C. FULFILLS OBLIGATIONS	1	2	3	4	5	6	7	
D. FOLLOW-THROUGH ABILITY	1	2	3	4	5	6	7	
E. EMOTIONAL BALANCE	1	2	3	4	5	6	7	
F. FRIENDLY	1	2	3	4	5	6	7	
G. TRUSTWORTHY	1	2	3	4	5	6	7	
H. OUTGOING	1	2	3	4	5	6	7	
I. GETS ALONG WITH OTHERS	1	2	3	4	5	6	7	
J. LEADERSHIP ABILITY	1	2	3	4	5	6	7	
K. WORKING WITH CHILDREN		1	2	3	4	5	6	7
L. SENSE OF HUMOR	1	2	3	4	5	6	7	
M. TEMPER CONTROL	1	2	3	4	5	6	7	
N. TACT	1	2	3	4	5	6	7	
O. TEACHABILITY	1	2	3	4	5	6	7	

PLEASE ANSWER THE FOLLOWING QUESTIONS:

What do you expect to gain from the experience as serving as a Jr. Staff Member?

2. State what you feel you can best do to help Troops, Patrols, and Campers.

Do you use Tobacco? () Would you be willing to agree not to use while on duty? ()
 Have you ever been convicted of a crime? _____ With a Child?
 Do you daily use drugs prescribed by a physician? () If so, what are they?

• FOR OFFICE USE ONLY *

Camp Work Area Preferences:

(1) _____

(2) _____ (3) _____

NOTES: _____

At Camp Assignments:

Week

1: _____

Week

2: _____

KNOWLEDGE OF SCOUTCRAFT SKILLS

Please place a check () opposite the skill and in the column which best represents your ability. Be honest and as objective as possible. Do not under or over rate yourself.

(Check Appropriate Column)

	HAVE TAUGHT	HAVE KNOWLEDGE	NEED HELP	HAVE MB
CAMPING MB				
Safety				
Sanitation				
CONSERVATION MB				
COOKING MB				
Fire Building				
Woods Tools				
FIRST AID MB				
HIKING MB				
Compass				
Map Reading				
Safety				
ENVIRONMENT MB				
Star Study				
Water				
PIONEERING MB				
Knots				
Lashing				
CAMPFIRE				
Songs - Cheers				
Stories - Skits				
AQUATICS				
Swimming MB				
Canoeing MB				
Boating				

PLEASE LIST OUTDOOR MERIT BADGES YOU HAVE EARNED:

Acceptance and participation in the Camping Programs are the same for everyone without regard to race, color, disability, or national origin.

TO BE FILLED OUT FOR ALL JR. STAFF APPLICANTS

NOTE: Please check camp applicant is applying for:

- () River Camp () Horseshoe Bend () Bovay Scout Ranch

UNIT LEADER APPRAISAL FOR JUNIOR STAFF PROGRAM

SCOUT'S NAME _____ UNIT NO: _____

This Scout is an applicant to become a Jr. Staff Member with the Sam Houston Area Council Summer Camps. The Jr. Staff Program and staffing can be strengthened by your honest evaluation of this individual - please be candid and frank. Thank you.

1. Has he been active in a majority of the unit's activities during the past year? _____
2. What office does he hold in your unit? _____
3. Does he have the general qualifications to be a member of the Camp Staff? _____
4. How long have you known this person? _____
5. With 1 the lowest and poorest and 7 as the highest and best, please grade the applicant to the best of your knowledge. Check NK for insufficient or no knowledge.

A. PROMPTNESS	1	2	3	4	5	6	7	NK
B. FOLLOW INSTRUCTIONS	1	2	3	4	5	6	7	NK
C. FULFILLS OBLIGATIONS	1	2	3	4	5	6	7	NK
D. FOLLOW THROUGH ABILITY	1	2	3	4	5	6	7	NK
E. EMOTIONAL BALANCE	1	2	3	4	5	6	7	NK
F. FRIENDLY	1	2	3	4	5	6	7	NK
G. TRUSTWORTHY	1	2	3	4	5	6	7	NK
H. OUTGOING	1	2	3	4	5	6	7	NK
I. GETS ALONG WITH OTHERS	1	2	3	4	5	6	7	NK
J. LEADERSHIP ABILITY	1	2	3	4	5	6	7	NK
K. WORK WITH CHILDREN	1	2	3	4	5	6	7	NK
L. SENSE OF HUMOR	1	2	3	4	5	6	7	NK
M. TEMPER CONTROL	1	2	3	4	5	6	7	NK
N. TACT	1	2	3	4	5	6	7	NK
O. TEACHABILITY	1	2	3	4	5	6	7	NK

6. Please give any additional comments you feel would benefit this Scout, use the back if necessary. DO NOT GIVE THIS FORM TO THE SCOUT. Applicants must have this appraisal form on file prior to their interview with the Camp Director.

Mail this confidential information direct to: PROGRAM SERVICES
 Sam Houston Area Council, B.S.A.
 P O Box 924528
 Houston, TX 77292-4528

NAME: _____
 Address: _____
 City/Zip: _____
 Phone: (H) _____ (B) _____
 Date: _____

SIGNED: _____
(Scoutmaster/Varsity Team Coach/Venturing Advisor)

PLEASE NOTE: A Camp Staff Application will be kept in "Pending" status until receipt of this appraisal. Please return promptly. Thank you!