



BOY SCOUTS OF AMERICA®
CAPITOL AREA COUNCIL

Capitol Area Council
 Boy Scouts of America
www.bsacac.org

Camp Staff 2024 Application

12500 N IH 35
 Austin, TX 78753
 (512) 926-6363

Personal Information

Name _____ Date _____

Desired Position _____

Home Address _____ Home Phone _____
Number & Street City State Zip

College Address _____ Cell Phone _____
(If Applicable) Number & Street City State Zip

E-Mail Address _____ Age as of June 1st, 2023
 14 15-17
 18-20 21+

Parent / Guardian Information (if under 18 yrs.)

Name _____ Relation _____

Parent E-Mail Address _____ Phone # _____

Scouting Experience (if applicable)

Currently Registered in Troop/Crew/Ship/Post _____ Council _____
 District _____

Current Rank (or highest earned) _____ Current Scouting Position _____

Years in Scouting as a Youth _____ Adult _____

Other Awards Earned (Nova, Venturing, etc) Check all that apply: _____

- NYLT Wood Badge Powder Horn
- NYLT Staff Wood Badge Staff Powder Horn Staff

Other Club Experience (if applicable)

Currently in _____

Current Position _____ Past Positions _____

Awards Earned _____

Years Involved _____



BOY SCOUTS OF AMERICA[®]

CAPITOL AREA COUNCIL

Education

High School/College Attending(ed) _____ Grade _____ Major _____

Extra-curricular Activities _____

Work Experience

Title

Dates Employed

Current Employer

Business Telephone

Supervisor

Duties

Previous Employer _____ Title _____ Dates Employed _____

Supervisor _____ Business Telephone _____

Duties _____

Previous Employer _____ Title _____ Dates Employed _____

Supervisor _____ Business Telephone _____

Duties _____

Have you ever been terminated or asked to resign from any job?

If so, give details on a separate sheet

Dates Available for Employment (mm/dd/yyyy) Start Date _____ End Date _____

If working only Days of Discovery Camp, camp employment will run from May 28th to June 14th.

If working only TechLab, camp employment will run from June 17th to June 26th.

If working both camps, camp employment will run from May 28th to June 26th.

**** Preference will be given to staff that can attend Staff Week (Days of Discovery Camp - May 28-31, TechLab Summer Camp - June 17-21).**

List any additional dates during camp you will not be available _____





Hobbies & Interests

Three horizontal lines for writing hobbies and interests.

Why do you want to be on Camp Staff? followed by four horizontal lines for writing.

References (First time employees: Please have at least one reference fill out the enclosed reference form.)

Three rows of reference information, each with fields for Name, Phone, and Email.

Please rate your expertise in the following areas:

- 1: Have an interest or enjoy subject matter.
2: Completed Merit Badge or basic knowledge in area.
3: Confident in knowledge and skills to teach others.
Leave blank if does not apply.

Class Leads

- Working with Elementary Age youth
Working with Middle School age youth

Entertainment

- Singing/ Song Leading
Storytelling
Crafts leader
Sports
Theater and acting

Making Skills

- 3D Printing
3D Design in CAD or Solidworks
Laser Cutting and 2D design
Photography/Photo Editing
Animation
Electronics
Environmental Science/Ecology
Video making
Programming
Robotics (Lego Mindstorm)
Robotics (Textris or Vex setup)
Woodworking
Welding
Engineering

Medical

- Medical Officer (EMT-B Min)





BOY SCOUTS OF AMERICA®
CAPITOL AREA COUNCIL

Seasonal Employment Reference Form

(To be completed by References)

Applicant's Name: _____

This individual is applying for employment in the summer camping program of Capitol Area Council. Camp staff can number as many as 50 individuals with as many as 200 campers per week. Staff positions are for as long as seven weeks. The success of our operations and the enjoyment of our campers are very dependent on the quality of our camp staff. It is important that competent and mature individuals who are positive role models fill all our staff positions. Your honest evaluation of this applicant will be greatly appreciated. Please complete this form and mail to the address below at your earliest convenience. Thank you for your time.

How well do you know this applicant?

____ Very Well ____ Casually ____ Rather Weak ____ I Don't Know This Person

Circle the words that best describe the applicant's behavior

Attitude:	Positive	Acceptable	Negative
Dependability:	Always	Usually	Irresponsible
Speaking Ability:	Very Verbal	Satisfactory	Limited Ability
Leadership:	Take Charge	When Asked/Directed	Follower
Appearance (Grooming & Dress):	Well Groomed	Usually Neat	Messy
Initiative:	Self-Motivated	Average Drive	Lazy
Common Sense:	Sound	Occasionally	None
Integrity:	Trustworthy	Usually Reliable	Lacking
Personality:	Outgoing	Pleasant	Bland
Teamwork:	Team Player	Cooperative	Obstructionist

Would you entrust the care of your children to this individual? ____ Yes ____ No

Recommendation: ____ Highly Recommended
 ____ Recommend Employment
 ____ Do Not Recommend Employment

Signature: _____ Relationship to Applicant: _____ Date: _____

Please Print Name: _____ Phone Number: _____ Email: _____

Please add any additional comments you wish to share on the reverse side.
Mail to: TechLAB Program Director, Capitol Area Council, 12500 N IH 35, Austin, TX 78753
Email to: jessica.snider@scouting.org

