



Capitol Area Council  
Scouting America  
capitolareascouting.org

## Camp Staff 2026 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 1<sup>st</sup>, 2026

□ 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  
 NYLT Staff

Wood Badge  
 Wood Badge Staff

Powder Horn  
 Powder Horn Staff

### Other Club Experience (if applicable)

Currently in \_\_\_\_\_

Current Position \_\_\_\_\_ Past Positions \_\_\_\_\_

Awards Earned \_\_\_\_\_

Years Involved \_\_\_\_\_



## Education

High School/College Attending(ed) \_\_\_\_\_ Grade \_\_\_\_\_ Major \_\_\_\_\_

Extra-curricular Activities \_\_\_\_\_

## Work Experience

Current Employer: \_\_\_\_\_ Title: \_\_\_\_\_ Dates Employed: \_\_\_\_\_

Supervisor: \_\_\_\_\_ Business Telephone: \_\_\_\_\_

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 \_\_\_\_\_**

**\*\* Preference will be given to staff that can attend all weeks of camp, including Staff Week (June 8th to July 17, with the week of June 29th off) .**

**List any additional dates during camp you will not be available \_\_\_\_\_**





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## Hobbies & Interests

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Why do you want to be on Camp Staff? \_\_\_\_\_

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

Name \_\_\_\_\_ Phone \_\_\_\_\_ Email \_\_\_\_\_  
Name \_\_\_\_\_ Phone \_\_\_\_\_ Email \_\_\_\_\_  
Name \_\_\_\_\_ Phone \_\_\_\_\_ 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.*

### Making Skills

3D Printing

3D Design in CAD or Solidworks

Animation and 2D design

Photography/Photo Editing

Electronics

Environmental Science/Ecology

Video making

Programming

Robotics (Lego Mindstorm)

Robotics (Textris or Vex setup)

Woodworking

Welding

Engineering

### Class Leaders

Working with Elementary Age youth

Working with Middle School age youth

### Entertainment

Singing/ Song Leading

Storytelling

Crafts leader

Sports

Theater and acting

### Medical

— Medical Officer (EMT-B Min)





## 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](mailto:jessica.snider@scouting.org)

