



# REFERENCES

NAME	ADDRESS	PHONE

## SCOUTING BACKGROUND

TROOP # \_\_\_\_\_ DISTRICT \_\_\_\_\_

HIGHEST YOUTH RANK ATTAINED:

CURRENT POSITION:

OTHER POSITIONS HELD:

COUNCIL ADDRESS IF DIFFERENT THAN NORTHEAST IOWA COUNCIL:

CHECK MERIT BADGES EARNED		
<b>ECOLOGY &amp; CONSERVATION</b>	<b>HANDICRAFT</b>	<b>AQUATICS</b>
<input type="checkbox"/> Astronomy	<input type="checkbox"/> Basketry	<input type="checkbox"/> Swimming
<input type="checkbox"/> Environmental Science	<input type="checkbox"/> Leatherwork	<input type="checkbox"/> Lifesaving
<input type="checkbox"/> Fish & Wildlife Mgt.	<input type="checkbox"/> Woodcarving	<input type="checkbox"/> Rowing
<input type="checkbox"/> Soil & Water Conservation	<input type="checkbox"/> Art	<input type="checkbox"/> Canoeing
<input type="checkbox"/> Fishing	<input type="checkbox"/> Space Exploration	
<input type="checkbox"/> Forestry	<input type="checkbox"/> Indian Lore	
<input type="checkbox"/> Mammal Study		
<input type="checkbox"/> Nature	<b>FIELD SPORTS</b>	<b>SCOUT SKILLS</b>
<input type="checkbox"/> Insect Study	<input type="checkbox"/> Rifle Shooting	<input type="checkbox"/> Camping
<input type="checkbox"/> Reptile Study	<input type="checkbox"/> Shotgun Shooting	<input type="checkbox"/> Cooking
<input type="checkbox"/> Weather	<input type="checkbox"/> Archery	<input type="checkbox"/> Pioneering
<input type="checkbox"/> Plant Science	<b>HEALTH LODGE</b>	<input type="checkbox"/> Orienteering
<input type="checkbox"/> Geology	<input type="checkbox"/> First Aid	<input type="checkbox"/> Hiking
<input type="checkbox"/> Bird Study	<input type="checkbox"/> Emergency Preparedness	<input type="checkbox"/> Wilderness Survival
	<input type="checkbox"/> Medicine	<input type="checkbox"/> Climbing

CAMP STAFF EXPERIENCE			
POSITION	YEAR	CAMP	COUNCIL
SUPERVISOR:			

NATIONAL CAMP SCHOOL	
Type: _____	Date: _____
Type: _____	Date: _____

**POSITIONS:** Indicate your first, second, and third choice of positions. (Minimum age for each position is in parenthesis.) Please indicate your preference for Cub or Boy Scout Camp. Circle one.

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|---|--|
| <input type="checkbox"/> Camp Director (21)                 | <input type="checkbox"/> Health Officer                        |
| <input type="checkbox"/> Program Director (21)              | <input type="checkbox"/> Camp Ranger                           |
| <input type="checkbox"/> Camp Cook (21)                     | <input type="checkbox"/> Handicraft Instructor                 |
| <input type="checkbox"/> Outbound Director (21)             | <input type="checkbox"/> Dining Hall Staff                     |
| <input type="checkbox"/> Shooting Sports Director (21)      | <input type="checkbox"/> Chaplain                              |
| <input type="checkbox"/> Aquatics Director (21)             | <input type="checkbox"/> Ecology-Conservation Instructor       |
| <input type="checkbox"/> Ecology Conservation Director (18) | <input type="checkbox"/> Dining Hall Steward                   |
| <input type="checkbox"/> Scoutcraft Director (18)           | <input type="checkbox"/> Waterfront Instructor                 |
| <input type="checkbox"/> Assistant Ranger (18)              | <input type="checkbox"/> Scoutcraft Instructor                 |
| <input type="checkbox"/> Climbing Instructor (18)           | <input type="checkbox"/> Adventure Trail Director              |
| <input type="checkbox"/> Archery Instructor (18)            | <input type="checkbox"/> Adventure Trail Instructor            |
| <input type="checkbox"/> Commissioner (18)                  | <input type="checkbox"/> Trading Post Manager                  |
| <input type="checkbox"/> Assistant Cook                     | <input type="checkbox"/> Assistant Trading Post Manager        |
| <input type="checkbox"/> Archery Instructor                 |  |
| <input type="checkbox"/> Handicraft Director                | <input type="checkbox"/> CIT (Counselor-in-Training)           |
|   | <input type="checkbox"/> IIT (Instructor in Training) Climbing |

**Is your age:** 13-14  15-17  18-20  21+

**ADDITIONAL DATA**

FOR CIT POSITIONS PLEASE CHECK WHAT WEEK YOU ARE AVAILABLE: (You may not CIT the week your troop is in camp.)

Week 1       Week 2       Week 3       Week 4

NOTE: POSITIONS ARE FOR A TERM OF SIX WEEKS (DEPENDING UPON POSITONS).

SALARY DESIRED: \_\_\_\_\_

PLEASE DESCRIBE YOUR QUALIFICATIONS FOR POSITONS DESIRED:

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## GENERAL INFORMATION

Note: All applicants must provide two (2) proof of employment eligibility at time of hire.

Do you use illegal drugs? \_\_\_ yes \_\_\_ no

Have you ever been convicted of a criminal offense? \_\_\_ yes \_\_\_ no

If yes, explain:

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Have you ever had your drivers license suspended or revoked? \_\_\_ yes \_\_\_ no

If yes,

explain:

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Have you ever been charged with child neglect or abuse? \_\_\_ yes \_\_\_ no

If yes,

explain:

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## APPLICANT: READ AND SIGN BELOW

I certify that the information which I have provided is correct and that I have in no way attempted to deceive or provide misleading information. I understand that furnishing any misleading or incorrect information on this application or its attachments will be just case for termination should I become employed at the Northeast Iowa Council.

I hereby give permission to the persons and companies named on this application and its attachments will be just case for termination should I become employed at the Northeast Iowa Council.

I hereby give permission to the persons and companies named on this application and its attachment to provide any pertinent information to the Northeast Iowa Council, or its duly authorized representative except where otherwise indicated. I release said parties from all liability for any damages resulting from the issuance of such information.

APPLICANTS SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

NOTE: Interviews will be held on individual bases. Any questions regarding this application or the application process should be directed to the Northeast Iowa Council, 563-556-4343 or 1-800-866-2721.