

DEL-MAR-VA COUNCIL, INC.
 801 N WASHINGTON ST.
 302-622-3300

BOY SCOUTS OF AMERICA
 WILMINGTON, DE 19801
 800-766-7268



CUB SCOUT DAY CAMP STAFF APPLICATION

(NOTE: All Day Camp Staff members must be 14 years of age by June 1)

Name _____

Home Address _____

City _____ State _____ Zip _____

Phone: (H) _____ (B) _____ Cell _____

Best Time(s) to call: _____

E-mail Address _____

Alternate E-mail address: _____

T-shirt Size _____ Extra Shirts @ \$ _____

POSITION(S) DESIRED

- | | | |
|------------------------------------|-----------------------------|-------------------------|
| _____ Health Supervisor | _____ Nature Director | _____ Den Coordinator |
| _____ First Aider | _____ Field Sports Director | _____ Den Leader |
| _____ Business Mgr. | _____ Aquatics Director | _____ Den Chief |
| _____ Arts & Crafts Director | _____ Games Coordinator | _____ Nature Instructor |
| _____ Arts & Crafts Instructor | _____ Field Sports Staff | _____ Aquatics Staff |
| _____ Other (please specify) _____ | | |

SCOUTING BACKGROUND

Current Registration: Unit# _____ Position _____

Or _____ not registered _____ Parent of Cub Scout Other _____

Training (check all that apply) _____ Fast Start _____ Basic _____ POW-WOW _____ Roundtable

_____ University of Scouting _____ Train the Trainer _____ Wood Badge _____ National Camp School

_____ Have worked with den or pack _____ Previous Day Camp staff

CERTIFICATIONS

<u>TYPE</u>	<u>Expiration Date</u>	<u>TYPE</u>	<u>Expiration Date</u>
_____ CPR Adult	_____	_____ Registered Nurse	_____
_____ CPR Infant & Child	_____	_____ EMT	_____
_____ First Aid	_____	_____ BB Instructor	_____
_____ Lifeguard	_____	_____ Safe Swim Defense	_____
_____ Swimming Instructor	_____	_____ Other	_____
_____ Archery Instructor	_____		

EXPERIENCE

List any previous camp or general experience you have had working with children

Organization/Camp Name

Location

#of years

1. _____

2. _____

3. _____

***Please attach a BSA Class 1 medical form with this application.

Write "1" in the space provided for activities you can teach without assistance. Write "2" for those activities you can assist with. Write "3" for those activities you enjoy.

___ Kickball

___ Swimming

___ Drama

___ Soccer

___ Chess

___ Arts & Crafts

___ Story Telling

___ Games

___ Volleyball

___ Ultimate

___ Nature

___ Songs

___ Camp Craft

___ Archery

___ Orienteering

___ Other _____

___ Other _____

___ Other _____

CHECK DATES AND TIMES OF AVAILABILITY

Date	All Day	From/To
___ Day 1	_____	_____
___ Day 2	_____	_____
___ Day 3	_____	_____
___ Day 4	_____	_____
___ Day 5	_____	_____

REFERENCES

Name

Phone

Relationship

1. _____

2. _____

3. _____

Applicant's Signature _____

Parent's Signature (if under 18) _____

Parent's Printed Name _____