Annawon Council, Boy Scouts of America Camp Norse Staff Application Camp Summer Program

PO Box 921 152 West Main Street Norton, MA 02766 Phone: 508.286.9202 ext. 203 Fax: 508.286.9203 <u>www.annawonbsa.org</u> Camp Director: Joe.Livingston@Scouting.org

Personal Contact Information

Name:		Licensed Driver: Yes	_ No Shirt Size:
Address:	City:	State:	Zip:
Primary Phone #: _	Cell Phone #:	Em	ail:
I will be (age)	during the 2014 camp season.	Cub Scout Day Cam	o (5 weeks plus 2 weekends)
	Camp Positions: Please lis	t in order of preferend	<i>ce</i> (1, 2, 3, etc.)
	<u>A</u>	ages 14 & 15	
	Jr. Counselor (CIT))Program	n Aide
	<u>Ag</u>	ges 16 and up:	
	_Lifeguard (16 +)Couns	elorScout Skills	Crafts/Nature
Sports		belos Weekend & Staff train ges 18 and up:	ing.)Trading Post
Scout Skills/N	ature Director Crafts/Spo	orts DirectorBB Range	OfficerArchery Range Office
	<u>Ag</u>	ges 21 and up:	
	Program Director	_Administration	Camp Cook
	Waterfront Director	Health Officer	
	Scouti	ng Information	
Are you registered i	n Scouting: Yes No Pack/Tro	op/Crew:	Unit #:
Current Rank (Yout	h): Current Uni	it or District/Council Position	n (Adult):
Scouting History: _			
Training:			
	nce:		

Educational Background

Year Completed or Year of	f Graduation (from highest level of	of education):	School:
Achievements, Honors, and	d Accomplishments:		
Certifications or Degrees:			
Extra Curricular Activities:	:		
	Current/Prev	vious Employment	
Place of Employment	Date of Employment	Position Title(s)Employ	yer Phone #
Please write a statement for	r the reason(s) for becoming a part	rt of the Camp Norse Staff: _	
Please List three references	s we may contact to obtain further	r information:	
Name	Relationship		Phone #
LETTERS OF RECO	DMMENDATION AND RESU	IMES ARE ENCOURAGE	ED, BUT NOT REQUIRED
I certify that all the information	ation provided on this application	is true and accurate to the be	est of my knowledge.
Signature:		Date:	
Parent/Guardian (if under 1	18):	Date:	
	You will be notified	by phone for an interview	
Camp Norse Staff Position:		Salary:	
/BSA Regi	stration/_	/Health Form	//Consent Form
//	_I-9 Form (w/IDs)	_//W-4 Form	//Contract