

LOST LAKE CAMP STAFF APPLICATION

Name: _____ Phone: _____

Your current Age: _____ Date of Birth: _____

Address: _____

City: _____ State: _____ Zip: _____

Check the type of position you are applying for:

____ Staff in Training ____ Paid Staff ____ Volunteer Staff

Please list when you would be available to work: _____

Mark in order of preference your top 3 choices of program areas:

____ Aquatics ____ Scoutcraft ____ Nature/Ecology

____ Handicraft ____ Rifle Range ____ Archery Range

____ First Aid/Safety ____ Rank Advancement ____ Commissioner

____ High Adventure ____ Trading Post ____ Kitchen

____ Other _____

SCOUTING BACKGROUND

Years in Scouting:

Cub Scout: ____ yrs Boy Scout: ____ yrs Explorer: ____ yrs Adult: ____ yrs

Current troop/team/post/crew: _____ Current Rank: _____

Order of the Arrow Membership: ____ Ordeal ____ Brotherhood ____ Vigil

List any chapter or Lodge positions below:

Position	Year	Chapter/Lodge

List any leadership training you have completed (check all that apply):

____ Junior Leadership Training ____ Staff in Training ____ Woodbadge

____ National Leader Seminar ____ Philmont Training ____ Cub Leader Basic

____ Scoutmastership Fund. ____ National Camping School

____ Other _____

List any national or world activities you have participated in (check all that apply):

____ National OA Conference ____ National Exploring Conference ____ Other

____ National High Adventure Base ____ National Jamboree ____ World Jamboree

List any summer camp experience below:

Position	Year	Camp

List any positions of leadership in your troop, team, post, or crew:

Position	Year	Camp

List any positions of leadership in school, church, or other activities:

Position	Year	Organization

List what year of school you have completed as of June 15 of application year:____
If you are currently in school, list school you are attending:_____

Please list below three references that we may contact. None of these can be members of your family. One may be your Scoutmaster, Coach, or Explorer Adv:

Name	Phone	Relation

Please use space provided below to tell us any additional information you wish us to know. Limit comments to the space provided.

SIGNATURES

Please Note: No part of the application process is to be taken as a contractual agreement for employment. Only after a letter of agreement has been issued is a job being offered.

Signature of Applicant:_____ Date:_____

If under age 18, this application must be approved by your parent or guardian.

Name of parent or guardian (please print):_____

Signature of parent or guardian:_____