



Revolutionary Trails Council, Boy Scouts of America
 1401 Genesee Street
 Utica, New York 13501
 315-735-4437 or 800-578-4873



2010 Camp Kingsley Application Employment

Please read carefully before proceeding and then fill out completely. Applicants are not required to give any information on this form that is prohibited by federal, state and local law.

APPLICANTS ARE CONSIDERED FOR ALL POSITIONS WITHOUT REGARD TO RACE, COLOR, RELIGION, SEX, NATIONAL ORIGIN, OR THE PRESENCE OF A HEALTH PROBLEM OR HANDICAP THAT IS UNRELATED TO THE PERSON'S ABILITY TO PERFORM THE JOB ASSIGNED.

Applicants who are accepted for employment are hired on a temporary basis and employment is based upon the continued satisfaction and needs of the facility, and may be terminated on 24-hour written notice by the Director. Any decision in this regard will be final.

Name _____ Social Security # _____

Mailing Address _____

City/State/Zip _____

Home Phone _____ Work Phone _____

Date of Birth _____ Age _____ E-Mail _____

What position(s) are you interested in:

- | | | | |
|---|--|---------------------------------------|---|
| <input type="checkbox"/> Health Officer | <input type="checkbox"/> Kitchen Staff | <input type="checkbox"/> Nature | <input type="checkbox"/> CIT (Ages 14-17) |
| <input type="checkbox"/> Waterfront | <input type="checkbox"/> Scout Skills | <input type="checkbox"/> Crafts | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Range | <input type="checkbox"/> Sports | <input type="checkbox"/> Commissioner | |

If you are a student please state your school, major, advisors name and phone number:

Please state your last 3 employers, supervisors name and phone number:

1. _____
2. _____
3. _____

Are you permitted to become lawfully employed in this country? ___ yes ___ no

Do you have any physical disabilities that might interfere with your performance of the job which you are applying for?

Yes No If yes, please explain _____

Please list any hobbies, activities, or areas of interest:

Scout Experience:

Troop _____ District _____ Council _____

Troop Position _____ OA Membership _____ Lodge # _____

Rank _____ Present Position _____

Please list any honors, awards and pertinent merit badges earned:

Please list any previous camp experience (where, when, what camp):

Please check any certifications listed below that you have (documentation needed):

N.R.A. Instructor N.C.S. A.R.C. Lifeguard WSI BSA Lifeguard
 C.P.R. First Aid CPR/BLS Medical License E.M.T. Other _____

What if anything should we know about you that is not covered in this application:

Have you ever been discharged or asked to resign from any job?

Yes No If yes, explain _____

Have you ever been convicted of a felony? (you can answer no if sealed, expunged, or eradicated)

Yes No If yes, explain _____

CONVICTION OF A CRIME IS NOT AN AUTOMATIC BAR TO EMPLOYMENT - ALL CIRCUMSTANCES WILL BE CONSIDERED, INCLUDING WHAT YOU WERE CONVICTED OF AND HOW LONG AGO. PLEASE PROVIDE COMPLETE INFORMATION ABOUT THE CONVICTION BY ATTACHING A SEPARATE STATEMENT.

Personal References (Non-relatives who have know you for a period of time)

Name _____ Relationship _____

Address _____ Phone Number _____

Name _____ Relationship _____

Address _____ Phone Number _____

Name _____ Relationship _____

Address _____ Phone Number _____

I AUTHORIZE INVESTIGATION OF ALL STATEMENTS CONTAINED IN THIS APPLICATION FOR EMPLOYMENT AS MAY BE NECESSARY IN ARRIVING AT AN EMPLOYMENT DECISION. I AUTHORIZE ALL MY PREVIOUS EMPLOYERS, SCHOOLS, AND OTHER REFERENCES TO FURNISH THE INFORMATION REQUESTED. I HEREBY DECLARE THAT THE INFORMATION PROVIDED BY ME IN THIS APPLICATION FOR EMPLOYMENT IS ACCURATE AND COMPLETE TO THE BEST OF MY KNOWLEDGE. I UNDERSTAND THAT ANY FALSIFICATION OR MISREPRESENTATION IN THIS APPLICATION IS CAUSE FOR DISCHARGE.

Applicants Signature _____ Date _____

Parent's Signature _____ Date _____
(if applicant under 18)