



# Camp Staff Application

Applicants for Camp Staff should be at least 16 years of age and have completed the 10th grade. Please complete this staff application and return it to the Old Hickory Council Office no later than **December 1.**

Mail to:  
Camp Director  
Old Hickory Council  
6600 Silas Creek Parkway  
Winston-Salem, NC 27106  
(336) 760-2900

## Personal Information

Full Name \_\_\_\_\_ Social Security No. \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Telephone \_\_\_\_\_ E-mail address \_\_\_\_\_  
Date of Birth \_\_\_\_\_  
Do you have a driver's license? \_\_\_\_\_ State and license no. \_\_\_\_\_

## Scouting Background

Current Unit No. \_\_\_\_\_ Current Position in unit \_\_\_\_\_  
Years in Scouting \_\_\_\_\_ O.A. member (no/ordeal/brotherhood/vigil) \_\_\_\_\_  
Rank obtained as a Scout \_\_\_\_\_ No. of merit badges \_\_\_\_\_  
Past unit positions served \_\_\_\_\_  
\_\_\_\_\_

## Camp Background

Years at camp as a Scout \_\_\_\_\_ as a leader \_\_\_\_\_ as a staff member \_\_\_\_\_  
Have you participated in the Camp Staff Development program? \_\_\_\_\_  
List past staff positions and years \_\_\_\_\_  
\_\_\_\_\_  
Are you a BSA Lifeguard? \_\_\_\_\_ Are you certified in CPR? \_\_\_\_\_  
Do you have a BSA National Camping School certificate? \_\_\_\_\_ Area and Date \_\_\_\_\_  
Please list certifications in aquatics, shooting sports, health and safety, or any other specialized training \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## Staff Placement

Check the merit badges that you have earned:

- |                                      |  |  |  |
|--------------------------------------|--|--|--|
| <input type="checkbox"/> Archery     | <input type="checkbox"/> Cycling               | <input type="checkbox"/> Lifesaving          | <input type="checkbox"/> Safety              |
| <input type="checkbox"/> Art         | <input type="checkbox"/> Emergency Prep.       | <input type="checkbox"/> Mammal Study        | <input type="checkbox"/> Small Boat Sailing  |
| <input type="checkbox"/> Astronomy   | <input type="checkbox"/> Environmental Science | <input type="checkbox"/> Metalwork           | <input type="checkbox"/> Soil & Water Cons.  |
| <input type="checkbox"/> Backpacking | <input type="checkbox"/> First Aid             | <input type="checkbox"/> Nature              | <input type="checkbox"/> Space Exploration   |
| <input type="checkbox"/> Basketry    | <input type="checkbox"/> Fish & Wildlife Mgt.  | <input type="checkbox"/> Oceanography        | <input type="checkbox"/> Swimming            |
| <input type="checkbox"/> Bugling     | <input type="checkbox"/> Fishing               | <input type="checkbox"/> Orienteering        | <input type="checkbox"/> Weather             |
| <input type="checkbox"/> Camping     | <input type="checkbox"/> Forestry              | <input type="checkbox"/> Pioneering          | <input type="checkbox"/> Whitewater          |
| <input type="checkbox"/> Canoeing    | <input type="checkbox"/> Geology               | <input type="checkbox"/> Rept. & Amph. Study | <input type="checkbox"/> Wilderness Survival |
| <input type="checkbox"/> Climbing    | <input type="checkbox"/> Indian Lore           | <input type="checkbox"/> Rifle Shooting      | <input type="checkbox"/> Wood Carving        |
| <input type="checkbox"/> Cooking     | <input type="checkbox"/> Leatherwork           | <input type="checkbox"/> Rowing              | <input type="checkbox"/> Woodwork            |

List any additional merit badges that you have earned that may be relevant to the summer camp program \_\_\_\_\_

Position desired at camp (list in priority order):

1) \_\_\_\_\_ 2) \_\_\_\_\_ 3) \_\_\_\_\_

Why do you want to work on the Raven Knob staff? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Dates available for employment (be specific) from \_\_\_\_\_ to \_\_\_\_\_

## Reference Information (please give two references)

Name \_\_\_\_\_

Title \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Telephone \_\_\_\_\_

Please review this application carefully to affirm that the information given is correct, to the best of your knowledge. In signing this application, you attest that the information given is true. You also agree to forfeit the right to view your employment file concerning reference information, in order to protect all parties involved. Once again, please read this application carefully before signing.

\_\_\_\_\_  
**Applicant's signature**

\_\_\_\_\_  
Date

\_\_\_\_\_  
signature of parent/guardian if under age 18