

**2012 Napowan Adventure Base Staff Application**

Northwest Suburban Council- 600 N. Wheeling Road Mount Prospect, IL 60056

Phone: 847.824.6880

Fax: 847.842.6925

**Personal Information**

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

E-mail: \_\_\_\_\_

(H) Phone: \_\_\_\_\_ (C) Phone: \_\_\_\_\_

**Scouting History**

Number of Years at Napowan: (Camper) \_\_\_\_\_ (Staff Member) \_\_\_\_\_ Positions

Order of the Arrow: ( ) Yes ( ) No Current Honor: \_\_\_\_\_

Current Unit Number: \_\_\_\_\_ Council: \_\_\_\_\_

Troop Leadership Held: \_\_\_\_\_

Philmont: ( ) Yes ( ) No Sea Base: ( ) Yes ( ) No Northern Tier: ( ) Yes ( ) No**Employment Certifications & History**Emergency Medical Technician (EMT): ( ) Yes ( ) No Red Cross First Responder Training: ( ) Yes ( ) NoRes Cross CPR Cert: ( ) Yes ( ) No Driver License: ( ) Yes ( ) No BSA Lifeguard: ( ) Yes ( ) NoAre you permitted to be lawfully employed in the United States: ( ) Yes ( ) No – *(Proof required upon employment)***Personal & Professional Reference:**

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Address: \_\_\_\_\_

City/ State/Zip: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Address: \_\_\_\_\_

City/ State/Zip: \_\_\_\_\_ Phone: \_\_\_\_\_

<b>Job Preference</b>			<i>(Please check top 3 Choices)</i>
<u>Camp Leadership (21 &amp; Older)</u>	<u>Senior Staff (18 &amp; Older)</u>	<u>Staff (15 &amp; Older)</u>	
<input type="checkbox"/> Camp Director	<input type="checkbox"/> Asst. Program Director	<input type="checkbox"/> Flintlock Staff	
<input type="checkbox"/> Asst. Camp Director	<input type="checkbox"/> Asst. Aquatics Director	<input type="checkbox"/> Nature Staff	
<input type="checkbox"/> Program Director	<input type="checkbox"/> Flintlock Director	<input type="checkbox"/> Aquatics Staff	
<input type="checkbox"/> Office Manager	<input type="checkbox"/> Nature Director	<input type="checkbox"/> Shooting Sports Staff	
<input type="checkbox"/> Business Manager	<input type="checkbox"/> Scoutcraft Director	<input type="checkbox"/> Trading Post Staff	
<input type="checkbox"/> Chaplain	<input type="checkbox"/> Verona Director	<input type="checkbox"/> Scoutcraft Staff	
<input type="checkbox"/> Aquatics Director	<input type="checkbox"/> Commissioner	<input type="checkbox"/> Verona Staff	
<input type="checkbox"/> Shooting Sports Director	<input type="checkbox"/> Asst. Camp Ranger	<input type="checkbox"/> COPE Staff	
<input type="checkbox"/> Health Officer	<input type="checkbox"/> Trading Post Manager	<input type="checkbox"/> Dining Hall Staff	
<input type="checkbox"/> COPE Director		<u>Other (14 &amp; Older)</u>	
<input type="checkbox"/> Camp Chef		<input type="checkbox"/> Counselor in Training	
		<input type="checkbox"/> Volunteer	

Why do you want to serve on Napowan Staff?

<b>Summer Availability</b> <i>(required)</i>	<i>(Check all that apply)</i>
<input type="checkbox"/> Staff Week (6/10-6/16)	<input type="checkbox"/> Session #1(6/17-6/23) <input type="checkbox"/> Session #2 (6/24-6/30) <input type="checkbox"/> Session #3(7/1-7/07)
<input type="checkbox"/> Session #4 (7/8-7/14)	<input type="checkbox"/> Session #5 (7/15-7/21) <input type="checkbox"/> Session #6 (7/22-7/28) <input type="checkbox"/> Session #7 (7/29-8/4)

I understand that if employed on the council camp staff, I will be required to become a registered member of the Boy Scouts of America, purchase required uniforms, and have a current (within one year) medical examination. Further, I hereby certify that the answers and other information on this application are true and correct and that I understand that any misrepresentation or conscious omission of the facts on my part will be justification for dismissal, if employed.

\_\_\_\_\_

Signature

\_\_\_\_\_

Date

Mail to:  
 Northwest Suburban Council  
 600 North Wheeling Road  
 Mount Prospect, IL 60056