

Okefenokee Area Council, BSA
2010 Camp Tolochee Summer Camp Staff Application

Name: _____ Age: _____
(As of 5/25/2010)

Address: _____ City: _____

Email: _____ State: GA. Zip code: _____

Phone (home) _____ Cell _____

Scout Registered in Troop: _____ Rank: _____ Date of last day of School: _____

Did you work at Summer Camp last year: YES NO Where you a Counselor in Training (CIT) Yes No

Last years staff salary per week _____ Requested salary for 2010 _____

What program area did you work at last year? _____

What Scouting program areas are you strongest in? _____

What Scouting program areas are you weakest in? _____

What is your personal advancement goals while on camp staff? _____

In order of priority, 1 (lowest) to 10 (highest), indicate your preference in program areas:

Outdoor Skills _____ Aquatics _____ Nature _____ Shooting Sports _____ Scout Shop _____ Dining Hall _____

Provisional Troop _____ Commissioners Staff _____ Sports _____ Handicraft _____ Healthcraft _____

Are you certified as a Lifeguard _____ Certification Date _____

CPR Certification Organization _____ Certification Date _____

Any other Certifications? _____

Scoutmaster Recommendation: _____

Parent Authorization (If under 18) _____

Camp Staff Interviews at Camp Tolochee in the Administration Building Training Room.

Interview Date: **February 27, 2010 10:30 AM**

Please fax to the Scout office at 912.283.6019 or mail to Okefenokee Area Council 302 Screven Ave.
Waycross, Ga. 31501 attn. Camp director.