

2018 Camp Old Indian Counselor in Training Application

The Camp Old Indian counselor in training program is an exciting opportunity for Scouts to serve alongside the summer camp staff in every capacity. This two week program is geared towards helping one get a taste of what being a counselor at Camp Old Indian is all about. Counselors in training who go above and beyond will not only get the most out of their time at camp, but they will also increase their chances of working staff in the future. This program includes room, board, and a Scouting t-shirt at no cost to the counselor in training.

Applicant's Name _____ (_____) _____
First Middle Initial Last Name

Permanent Address _____ **City** _____ **State** _____ **Zip** _____

Email _____ **Phone** (_____) _____ (Cell Y/N)

Date of birth _____ **Shirt size** _____

(Must be at least 14 years of age, and under the age of 18 during the duration of their CIT session)

Parent/Guardian _____ **Relation to Applicant** _____

Email _____ **Phone** (_____) _____ (Cell Y/N)

Emergency Contact _____ **Relation to Applicant** _____

Phone (_____) _____ (Cell Y/N)

Scouting History

Troop/Post/Crew Number _____

Highest Rank _____

Offices Held _____

List Awards Or Certifications

Camp Participation History

Camp Name _____ Year(S) _____ Camp Name _____ Year(S) _____

Camp Name _____ Year(S) _____ Camp Name _____ Year(S) _____

Education

Name Of High School _____ Favorite Subject _____

Club, Sports Team, Other Leadership Roles

Organization _____ Position _____ Date _____ Currently Serving (Y/N)

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Organization _____ Position _____ Date _____ Currently Serving (Y/N)

Interest (Circle the three departments that you are most excited to work in):

Aquatics

Outdoor Skills

Handicraft

Ecology

Callahan Mountain Village

Steam

Civil Development

Shooting Sports

First Year Camper

Which two week session are you willing to commit to (CITs must return home on Saturday in between their weeks):

- 1) June 17th-June 30th
- 2) June 24th-July 7th
- 3) July 1st-July 14th
- 4) July 8th-July 21st

Why would you like to be a counselor in training

Why should you be chosen to serve as a counselor in training

References (Coach, Teacher, Scoutmaster, Leader, Youth Minister, etc.):

Name and Title _____ Organization _____
 Address _____ Day Phone _____

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 Address _____ Day Phone _____

Name and Title _____ Organization _____
 Address _____ Day Phone _____

Next Steps

- 1) Ask a non-family member to write a letter of recommendation and staple it to the back of this application
- 2) Submit your application, letter of recommendation, and current BSA medical form via mail or email to the Camp Director at:
 Mail: Camp Director, Blue Ridge Council, 1 Park Plaza, Greenville, SC 29607
 Email: Michael.Prachar@Scouting.org
- 3) You will be contacted shortly after your application is received regarding how to proceed

I CERTIFY THAT THE ABOVE INFORMATION IS CORRECT TO THE BEST OF MY KNOWLEDGE

I agree to live by the Scout Oath and Law and I subscribe to the BSA Declaration of Religious Principle. I am or will become a registered member of the Boy Scouts of America.

Applicant's Signature _____ Date _____

Parent/Guardian's Signature _____ Date _____

Applications must be received by June 10th, 2018)