

Position Applied For: _____ Date Received: (official use only) _____

BAY-LAKES COUNCIL JAMBOREE LEADER APPLICATION

Name: _____ Occupation: _____

Address: _____

Phone: (H) _____ (Cell) _____

Email Address: _____ District: _____

Years in Scouting: Adult _____ Youth _____ Rank _____

Current registered position: _____ Unit _____

Adult position(s) held, and for how long?

Scoutmaster	_____	Advisor	_____
Assistant Scoutmaster	_____	Assoc. Advisor	_____
Unit Committee Chair	_____	Skipper	_____
Unit Committee Member	_____	Mate	_____
Commissioner	_____	Other: _____	_____

Scouting awards received _____

Can you meet the High Adventure standards listed on BSA medical form (AHMR #680-001 Summit)) Y / N

Please describe any limitations: _____

Describe your long-term camping experience: _____

Training experience:

	Date	Description
Scoutmaster Position-Specific	_____	_____
Venturing Advisor Position-Specific	_____	_____
Introduction to Outdoor Leader Skills (IOLS)	_____	_____
Wood Badge	_____	_____
Other	_____	_____
National Experiences (i.e. Jamboree, NOAC, Philmont)	_____	_____

First aid training: Red Cross Advanced _____ CPR _____ EMT _____ Other _____

State why you decided to participate in this experience and what you expect to gain from it: _____

Provide any other information that you believe will be helpful in assessing your qualifications for the position for which you are applying.