

Position Applied For: _____

Date Received: (official use only) _____

BAY-LAKES COUNCIL JAMBOREE LEADER APPLICATION

Name _____ Occupation _____

Address _____ City _____ St _____ Zip _____

Phone (H) _____ (Cell) _____

Email _____ 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:

	<i>Date</i>	<i>Description</i>
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 information you believe will be helpful in assessing your qualifications for the position for which you are applying: