



Grand Teton Council

Boy Scouts of America

Counselor in Training Application

(14 - 15 years old)

Web Site - www.grandtetoncouncil.org

3910 Yellowstone HYWY
Idaho Falls, Id. 83402
Office – 208 522-5155
Fax – 208 522-5158

2306 Pocatello Cr. Rd
PO Box 2854
Pocatello, Id. 83206
Office -- 208 233-4600
Fax – 208 236-0455

Personal Information

Name _____ Social Security # _____

Address _____ City _____ State _____ Zip _____

Birthdate _____ I will be _____ years old by June 15th, 2021*

Phone # _____ E-Mail Address _____

*Staff members must be registered in a Scout Troop or Varsity Scout Team and be 14 years of age or older.

Scouting/ Camping Experience

Troop/ Team # _____ Boy Scout Rank _____ OA Experience _____

Year	Camp Attended/ Location	Position (if on Staff)

Education

School _____ Highest Grade Completed _____ GPA _____

Camp Staff I wish to apply for: (Mark 1st, 2nd and 3rd Choices)

- _____ Krupp Scout Hollow Day Camp
- _____ Island Park Scout Camp

Areas I would like to experience while in camp: (Mark all that apply)

- Archery
- Commissary
- Handicraft
- Nature
- Waterfront
- Ranger
- Rifle Range
- Scoutcraft
- Trading Post
- COPE (Island Park)

Please attach a letter containing your responses to the following questions –

1. What contributions do you feel you could make to camp?
2. What impact can a Scout camp and its staff have on the life of a Scout?
3. Write a brief biographical sketch. Include any experience or specialized training in camping or other fields that qualify you for the position you are applying.

References – Please list the names of 2-3 adults that would serve as character references for you other than family members

Name	Address	Phone

Standards for Counselors in Training:

~ Code of Conduct ~

As a Counselor in Training at the camps in the Grand Teton Council, I understand that my personal example and conduct prior to and during the camping season must be of the highest standard.

I understand that the following behaviors are reason for my immediate removal from the training program.

- Use of alcohol or illegal drugs on camp property.
- Use of tobacco products.
- Theft.
- Violation of youth protection procedures.
- Any other unScout-like behavior.

I will follow the Scout Oath and Law in all that I do.

Scout Oath

On my honor I will do my best
 To do my duty to God and my country
 And to obey the Scout Law;
 To help other people at all times;
 To keep myself physically strong,
 mentally awake, and morally straight.

Scout Law

A Scout is:

- | | | |
|-------------|-----------|----------|
| Trustworthy | Courteous | Thrifty |
| Loyal | Kind | Brave |
| Helpful | Obedient | Clean |
| Friendly | Cheerful | Reverent |

~ Dress and Grooming Standards~

As a participant in the Counselor in Training Program of the Grand Teton Council, participants must meet the dress and grooming standards to enhance the image and professionalism conveyed to campers and guests of the camps.

- Official Boy Scout uniforms are to be worn at all official camp ceremonies, such as flag ceremonies, campfires and at other times designated by the Camp Director.
- Uniforms are to be official Boy Scouts of America issue and must be worn properly.
- Haircuts for men must be conservative, not long or ragged. Dyed hair in unnatural colors (Green, pink, blue, etc) and extreme hair styles will not meet standards.
- Jewelry should be conservative, tasteful and is limited to: finger rings and watches.
- No facial hair may exist below the middle of the ear, except to a neatly trimmed mustache, which shall not exceed the width or length of the upper lip, or as approved at the time of interview.

As the Boy Scouts of America is a private organization, registration in the Boy Scouts of America is a requirement for participation in the Counselor in Training program of the Grand Teton Council.

I have read and if selected to participate in the Counselor in Training Program for the Grand Teton Council, will live by the code of conduct and dress and grooming standards stated above along with other guidelines that will be given at time of acceptance.

Applicant's signature _____ Date _____

If hired, the following information is needed—

Primary Health Insurance Carrier

Company _____

Policy # _____

Insured's Name _____

Please Circle Your Size –

Adult T-shirt - Medium Large X Large XX Large

Adult Jacket - Medium Large X Large XX Large