Tukabatchee Area Council 2022 Application for Employment Seasonal Camp Staff

An Equal Opportunity Employer

The Tukabatchee Area Council, Boy Scouts of America, is an equal opportunity employer. The Tukabatchee Area Council does not discriminate in employment on account of race, color, religion, national origin, citizenship status, ancestry, age, sex, sexual orientation, marital status, physical disability, military status, or unfavorable discharge from military service.

In accordance with Boy Scouts of America qualifications and requirements, I hereby subscribe to the Scout Oath or Promise, Law, and the declaration of religious principle. I agree to abide by the Charter, Bylaws, and Rules and Regulations of the Boy Scouts of America.

Applicants are not required to give any information on this form that is prohibited by federal, state, or local law.

All camp staff members must be registered members of the Boy Scouts of America.

			ı
Name:			
Preferred Name:			
Address:			
City:			
Phone:			
Age 18 or older? Yes No	Youth applicants	, have you taken NYLT?	
Are you available to work 6/5/22 to 6/25/22? Yes	s No		
If no, list the dates you are available:			
There are additional training weekends prior to	summer camp. Please plan or	attending those as well. Those	dates are TBD.
Have you ever been employed by the council? I	f so, when?		
How were you referred to the council?			
,			
If by an individual and/or organization, give the na	ame		
List all specialized skills and training applicable to	o the position for which you a	re applying.	
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Education	Highest Degree:				
(Attach information about other degrees or diplomas earned or in progress on a separate sheet. Also include technical or business training.)	GPA:		Graduate		No 🗖
	Major:				
	School:				
	Location:				
Licenses and Certifications	License or Certificate:	:			
(Attach information about other licenses or certifications on a separate sheet.)	Issue Date:	ormat–mm/dd/yyyy)	License No. (if ap	plicable):	
	,				
	State/Country:		Expira		
	otato, obuntry.				Date Format-mm/dd/yyyy)
Prior Work Experience	, , ,	on in the same format	ate, even if that employment on another sheet. Include mi		For more than two employers, as if an employer, including
Last Employer:					
May we contact your curr	rent employer? Yes	No 🔲			
Address:					
Supervisor Name:			Phone:		
Start Date:	End Date:		Ending Pay Rate:		per
(Date Format-mm/	/dd/yyyy) (Date F	Format–mm/dd/yyyy)			
Ending Position or Rank:					
Reason for Leaving*:					
Previous Employer:					
Address:					
City:		State:	Zip Code:		
Supervisor Name:			Phone:		
Start Date:	End Date:		Ending Pay Rate:		per
(Date Format-mm/	/dd/yyyy) (Date F	Format–mm/dd/yyyy)			
Ending Position or Rank:					
Reason for Leaving*:					
*Have you ever been term	ninated or asked to resi	gn from any job?		_lf so, give de	tails on a separate sheet.

Camp Applying For:		Desired Position:	
Boy Scout/Youth Experien			
Council:			
Unit Number:	No. of Years T	enure as Youth:	Adult:
Offices Held:			
Achievements:			
Special Training Completed:			
List Hobbies and Special Int	erests:		
References Give the na	mes of three persons not related to you w	hom you have known for at le	east three years.
Name	Address, Phone, Email	Company	Years Acquainted
1			
2			
3			
0			
In compliance with federal law	kground investigations, including criminal back, all persons hired will be required to verify ment eligibility verification document form	their identity and eligibility to w	ork in the United States and to
Please read carefully before	signing:		
information on this application contained in this application results of any investigation r dissemination of the results America, to contact reference	low that I have given the Tukabatchee Are on. No requested information has been confor employment as may be necessary in a may be disclosed to other employees involof any investigation to such employees. I also provided for employment reference characters, I understand that this will constitute.	ncealed. I authorize investigati arriving at an employment deci- ved in the hiring process and I authorize the Tukabatchee Are ecks. If any information I have	on of all statements sion. I understand that the consent to the a Council, Boy Scouts of provided is untrue, or if I
any obligation for the Tukab Tukabatchee Area Council, without cause and without p	completion of this application nor any oth atchee Area Council, Boy Scouts of Amer Boy Scouts of America, or I can terminate rior notice. I understand that no represent ntrary to the foregoing or make any oral as	ica, to hire me. If I am hired, I u my employment at any time a ative other than the Scout exe	Inderstand that either the nd for any reason, with or cutive has any authority to
	Signature		 Date

TUKABATCHEE AREA COUNCIL BACKGROUND INVESTIGATION DISCLOSURE AND AUTHORIZATION

For Use With Tukabatchee Area Council Employment Application Applicants aged 18+

In making this application I understand that investigative reports, which may include information regarding any criminal background, my creditworthiness, credit standing, credit capacity, character, general reputation, personal characteristics, or mode of living, may be made. I authorize the Tukabatchee Area Council to procure or cause to be procured such reports. Such a report may be a "consumer report" or an "investigative consumer report" within the meaning of the Fair Credit Reporting Act ("FCRA"), in which event I am entitled, upon my request in writing, to receive a complete and accurate disclosure of the nature and scope of the investigation requested by the Tukabatchee Area Council and a summary of my rights under the FCRA.

I also understand that under the FCRA, before taking any adverse employment action based in whole or in part on a consumer report or investigative consumer report, the Tukabatchee Area Council must provide me with a copy of the report and a written description of my rights under the FCRA. In addition, if any adverse action is taken against me based in whole or in part on any information contained in a consumer report, the Tukabatchee Area Council must give me a notice. The notice may be given in writing, orally, or by electronic means and must include the following:

- The name, address, and telephone number of the consumer reporting agency (including a toll-free telephone number established by the agency, if it is a nationwide consumer reporting agency) that provided the report.
- A statement that the consumer reporting agency did not make the adverse decision and is not able to explain why the decision was made.
- A statement setting forth my right to obtain a free disclosure of my file from the consumer reporting agency if I request the report within 60 days.
- A statement setting forth my right to dispute directly with the consumer reporting agency the accuracy or completeness of any information provided by the consumer reporting agency.

Signature	Date
Printed Name	

YOUTH PROTECTION TRAINING REQUIRED

All applicants must turn in a copy of their Youth Protection Training Certificate with their application.

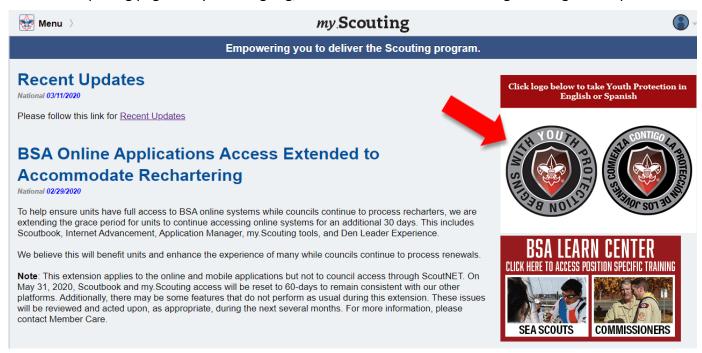
Guidance on how to take Youth Protection Training is attached. You will need your BSA member number to create an account at my.scouting.org. If you already have a my.scouting.org account, you are set to take the training.



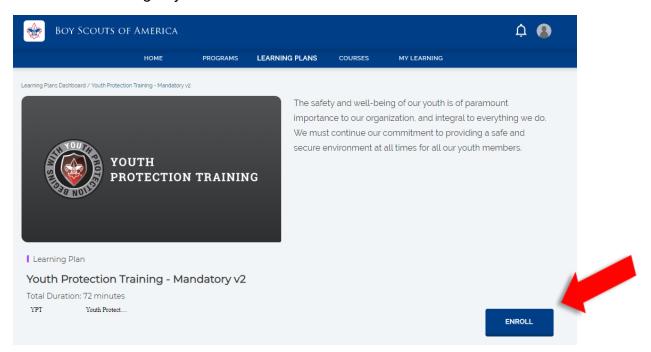
HOW TO GUIDE FOR TAKING YOUTH PROTECTION TRAINING

(Recommended Browsers are Google Chrome for the PC or Safari for the MAC).

- 1. Go to http://my.scouting.org
- 2. Enter your login name and password.
- 3. On the opening page of my.scouting.org, click on the Youth Protection logo for English or Spanish.



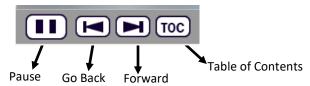
4. On the Youth Protection page of the BSA Learn Center select the enroll button to add Youth Protection training to your account.



5. Select the arrow button on the middle of your screen. When you are ready to begin training select the START button on the module.



Navigation tools include:

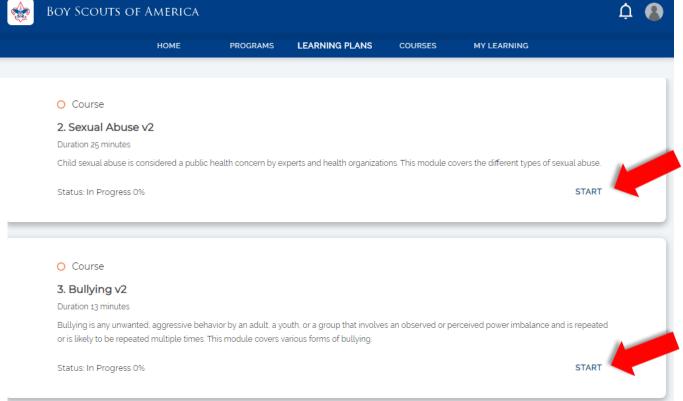


NOTE: **In order to meet timing for state regulations**, you will not be able to fast forward (button will be grayed out) until the audio finishes playing for each slide. Once the audio is completed, the forward button will be appear. Click the forward button to proceed.

6 Upon completion of each course select the arrow to "Return to Youth Protection Training".



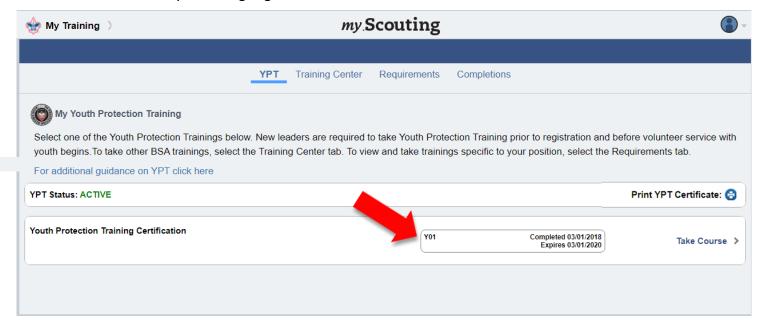
7 You may now complete the other 2 modules by selecting the START button.



8 The Youth Protection Training consists of three modules and a test module. All four modules will need to be completed to be considered trained for the Youth Protection Training. Once you have completed the 3 courses you may take the YPT Certification Test. Select the START button to take the test.



9. When the four modules have been completed you will see a YO1 completion along with the date you completed the training will show on my. Scouting.org by selecting from the pulldown menu "My Training" from the "YPT" tab in my. Scouting.org.



10. You may now print out a Youth Protection Training Certificate by selecting the printer icon.

