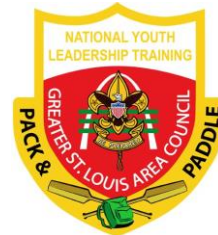




ScoutingAmerica
National Youth Leadership Training
ADULT STAFF APPLICATION



PLEASE PRINT CLEARLY OR TYPE THE FOLLOWING INFORMATION

Unit	District		Troop or Unit #		E-Mail	
	Name		First	MI	Last	Able to successfully complete BSA Swim Test?
Address	Street					
	City				State	Zip
Phone	Home ()		Business Phone ()		Cell Phone ()	
	Date of Birth / /		Age	Condition of Health / Physical Limitations	Boy Scouts of America membership ID number: _ _ _ _ _	
Stats	Scouting Experience		Current Scouting Position	Years In Scouting	Previous NYLT Staff : Year(s) & Position	

Why do you want to mentor and enable the youth of our council?

What makes you the right person?

Explain your approach to scouting leadership.

COMPLETE THE REVERSE SIDE

SCOUTING HISTORY

BOY SCOUT / VARSITY		VENTURING / EXPLORING		DISTRICT / COUNCIL / NAT'L	
INDICATE MOST RECENT <u>YEAR</u> OF TRAINING COURSES COMPLETED (OR NUMBER OF YEARS ATTENDED)					
<input type="checkbox"/> BS Fast Start	<input type="checkbox"/>	<input type="checkbox"/> Venturing Fast Start	<input type="checkbox"/>	<input type="checkbox"/> Red Cross First Aid	<input type="checkbox"/>
<input type="checkbox"/> BS Basic Leader Training	<input type="checkbox"/>	<input type="checkbox"/> Venturing Basic Leader Training.	<input type="checkbox"/>	<input type="checkbox"/> Safe Swim Defense	<input type="checkbox"/>
<input type="checkbox"/> Varsity Basic Leader Training	<input type="checkbox"/>	<input type="checkbox"/> Powder Horn	<input type="checkbox"/>	<input type="checkbox"/> Wood Badge-21st Century: _____	<input type="checkbox"/>
<input type="checkbox"/> BS Wood Badge (b/4 2001): _____	<input type="checkbox"/>	<input type="checkbox"/> Youth Protection Training	<input type="checkbox"/>	<input type="checkbox"/> Pressurized Fuel Training	<input type="checkbox"/>
<input type="checkbox"/> Hazardous Weather	<input type="checkbox"/>	<input type="checkbox"/> NRA Certified Instructor	<input type="checkbox"/>	<input type="checkbox"/> University of Scouting	<input type="checkbox"/>
<input type="checkbox"/> Trek Safely	<input type="checkbox"/>	<input type="checkbox"/> Safety afloat	<input type="checkbox"/>	<input type="checkbox"/> Scouter Skills Conference	<input type="checkbox"/>
INDICATE <u>NUMBER OF YEARS</u> IN EACH OF THE FOLLOWING ADULT SCOUTING POSITIONS & STAFFS:					
<input type="checkbox"/> Scoutmaster	<input type="checkbox"/>	<input type="checkbox"/> Crew Advisor	<input type="checkbox"/>	<input type="checkbox"/> Philmont Training Center	<input type="checkbox"/>
<input type="checkbox"/> Special Needs Trainer	<input type="checkbox"/>	<input type="checkbox"/> Crew Consultant	<input type="checkbox"/>	<input type="checkbox"/> Wood Badge (21st C.) Staff	<input type="checkbox"/>
<input type="checkbox"/> Campmaster Advisor	<input type="checkbox"/>	<input type="checkbox"/> Venturing Roundtable Staff	<input type="checkbox"/>	<input type="checkbox"/> NAYLE Staff: _____	<input type="checkbox"/>
<input type="checkbox"/> Troop Training Coordinator	<input type="checkbox"/>	<input type="checkbox"/> Kodiak Staff	<input type="checkbox"/>	<input type="checkbox"/> University of Scouting Presenter	<input type="checkbox"/>
<input type="checkbox"/> Troop Committee Member	<input type="checkbox"/>	<input type="checkbox"/> Powder Horn Staff	<input type="checkbox"/>	<input type="checkbox"/> District Committee/Event: _____	<input type="checkbox"/>
<input type="checkbox"/> Varsity Coach	<input type="checkbox"/>	<input type="checkbox"/> OA Reunion/Conclave Staff	<input type="checkbox"/>	<input type="checkbox"/> District Commit. Member: _____	<input type="checkbox"/>
<input type="checkbox"/> Varsity Program Advisor	<input type="checkbox"/>	<input type="checkbox"/> Jamboree Troop Leader	<input type="checkbox"/>	<input type="checkbox"/> District Member-At-Large	<input type="checkbox"/>
<input type="checkbox"/> BS Adult Training Staff	<input type="checkbox"/>	<input type="checkbox"/> First Aid/CPR Instructor	<input type="checkbox"/>	<input type="checkbox"/> JLTC Staff: _____	<input type="checkbox"/>
<input type="checkbox"/> Varsity Training Staff	<input type="checkbox"/>	<input type="checkbox"/> Camporee Staff	<input type="checkbox"/>	<input type="checkbox"/> NYLT Staff: _____	<input type="checkbox"/>
<input type="checkbox"/> Wood Badge Staff (before '01)	<input type="checkbox"/>	<input type="checkbox"/> Ceremonial Team Advisor	<input type="checkbox"/>	<input type="checkbox"/> NOAC Staff: _____	<input type="checkbox"/>
INDICATE <u>YEAR</u> OF ALL AWARDS & HONORS RECEIVED					
<input type="checkbox"/> BS Leader Training Award	<input type="checkbox"/>	<input type="checkbox"/> Venturer Leader Training Award	<input type="checkbox"/>	<input type="checkbox"/> District Commissioner /ADC Key or Arrowhead	<input type="checkbox"/>
<input type="checkbox"/> Scoutmaster's Key	<input type="checkbox"/>	<input type="checkbox"/> Venturing Advisor's Key	<input type="checkbox"/>	<input type="checkbox"/> Unit Commissioner Key or Arrowhead	<input type="checkbox"/>
<input type="checkbox"/> SM Award of Merit	<input type="checkbox"/>	<input type="checkbox"/> Venture Advisor Award of Merit	<input type="checkbox"/>	<input type="checkbox"/> District Committee Key	<input type="checkbox"/>
<input type="checkbox"/> Varsity Coach's Key	<input type="checkbox"/>	<input type="checkbox"/> Venture Leadership Award	<input type="checkbox"/>	<input type="checkbox"/> District Award of Merit	<input type="checkbox"/>
<input type="checkbox"/> Order of the Arrow: _____	<input type="checkbox"/>	<input type="checkbox"/> Proficient Trainer	<input type="checkbox"/>	<input type="checkbox"/> Religious Award: _____	<input type="checkbox"/>
<input type="checkbox"/> BS Roundtable Staff Award	<input type="checkbox"/>	<input type="checkbox"/> Expert Trainer	<input type="checkbox"/>	<input type="checkbox"/> Silver Beaver	<input type="checkbox"/>

SELECT THE NYLT STAFF POSITION FOR WHICH YOU ARE APPLYING

SM (Scoutmaster)

SA (Assistant Scoutmaster)

PD (Program Director)

BM (Business Manager)

QM (Quartermaster)

UC (Camp Commissioner)

YSA (Youth Staff Advisor)

PP (Pack and Paddle Staff)

First Choice _____

Second Choice _____

I understand that this is a multi-date commitment. Staff developments are held once a month in February, March, April, and May, a work weekend in June, and a weeklong camp commitment in June or July of the year you are chosen to serve.

Applicant Signature: _____

Senior Patrol Leader or Crew President Endorsement

Why would the above adult make a great NYLT leader?

Endorsement signature and contact info:

Phone # H: (____) _____

C: (____) _____

Email: _____

Applications should be emailed to Malcolm Bliss at malcolmbless@prodigy.net or mailed to: NYLT, Greater St. Louis Area Council, 4568 West Pine Blvd., St. Louis, MO 63108