Purpose:
To provide qualified Scouts with a positive Scouting experience that will allow them to understand the multi-faceted roles and responsibilities of Scout camp staff members; and to provide the camp with prospective camp staff members who have demonstrated positive leadership and instructional abilities.

Responsible to:
Counselors in Training are responsible to the CIT Commissioner and directly supervised and evaluated by the director of the area to which they are assigned.

Basic Requirements:
1. Must be a registered Scout or will to become one; fourteen years or older
2. Must submit a CIT application.
3. Must have unit leader endorsement based on observed leadership and instructional qualities
4. Must be approved by the Program Director.
5. Recommendation by specific camp area directors will be helpful.
6. Must provide a current BSA Health Form, parts A, B, and C upon check-in.

Job Description
1. CITs will be expected to help in the instruction of skills within their assigned program areas. They will, under no circumstances, be responsible for solo instruction of any skill or badge.
2. At the discretion of the CIT Commissioner, a CIT will either be assigned to one program area, or will “float” around between different areas.
3. CITs will be assigned to one or more of the following areas:
   a. Aquatics
   b. Handicraft
   c. STEM
   d. Scoutcraft
   e. Shooting Sports
   f. FROGS
   g. Health Lodge
   h. Commissary
4. CITs will receive no compensation other than room and board.

Restrictions:
1. CITs will not be allowed to earn merit badges
2. CITs will not serve during the week of their troop’s encampment
3. CITs will not leave camp at any time, except for a recognized emergency

Additional Information:
1. CITs will be provided with pre-set accommodations in the staff area.
2. CITs will be expected to observe the same rules of conduct as staff members
3. CITs will under no circumstances be hazed or abused in any way.
4. CITs will wear a complete Scout uniform while in camp.

Note: The Old North State Council reserves the right to terminate a CIT’s service at any time should conduct or other circumstances warrant such action.
Old North State Council

Boy Scouts of America

Requirements:
1. Registered in Scouting (Troop, Team, or Crew)  
4. Be in good health and physically fit
2. Should be 14 years of age before camp  
5. Ability to teach others and know Scouting subjects
3. Have experience in unit leadership  

(PLEASE PRINT)

Full Name __________________________________ Age ______ Date of Birth ________________
Address ___________________________________ City __________________ State _______ Zip _________
Phone # ___________________________ Unit _________ E-mail __________________________
Number of Years as: Cub ______ Scout _______ Explorer _______ Venturer _______ O.A. ______ Camper ___
Leadership Positions Held: _____________________________________________________________
Junior Leader Training ___________________________ Average School Grade ______________________

In what areas of Scouting do you feel most qualified?
________________________________________________________________________________________

What areas of Scouting do you like best?
________________________________________________________________________________________

What are your hobbies?
________________________________________________________________________________________

List church activities
________________________________________________________________________________________

List any special awards or recognitions
________________________________________________________________________________________

My 1st, 2nd, and 3rd choices of weeks are as follows: 1) _____ 2) _____ 3) _____

________________________________________________________________________________________

Parent or Guardian Name ____________________________ Parent or Guardian Email __________________

Signed ______________________________________ Signed ______________________________

Youth Parent or Guardian

Unit Leader Endorsement:

I approve and recommend ___________________________ for consideration as a Counselor-in-Training.

Date: ___________ Signed ___________________________ Unit Leader _______ Unit ______

Comments: ____________________________