



COUNSELOR IN TRAINING APPLICATION



Old North State Council

Boy Scouts of America

Requirements:

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

(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 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 choice of weeks are as follows: **1)** _____ **2)** _____ **3)** _____

Signed _____ Signed _____
Scout Parent or Guardian

Unit Leader Endorsement:

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

Date: _____ Signed _____, Unit Leader Unit _____

Comments: _____