

Region	Council No.

National Office Use
Personal Locator No. _____
NSJ Troop No. _____

Council Headquarters City and State _____

2005 NATIONAL SCOUT JAMBOREE, BOY SCOUTS OF AMERICA, STAFF APPLICATION

An Offer of Service (Must be returned to the local council)

Please print one letter in each space—press hard; you are making four copies.

Driver's License and State

Name—First Name and Initial	Last Name	Social Security Number

Address—Street or R.F.D.	Height _____ Weight _____	Date of Birth Mo. Day Year	Sex M/F

Additional Address Line (If Needed)	Area Code and Telephone No. (Evening)	Area Code and Telephone No. (Daytime)

City	State	ZIP Code	Area Code and Fax No.

E-mail _____

Emergency Contact	Relationship	Phone

Jamboree staff positions are open to adult men and women who meet required qualifications. Adult staff members must be registered members of the Boy Scouts of America and have been born before July 25, 1984. Youth staff members must have been born between August 3, 1984 and July 25, 1989, and be registered members of the Boy Scouts of America.

I hereby apply for a leadership position for the 2005 National Scout Jamboree, and prefer consideration for the following positions:

☐ JAMBOREE STAFF ☐ SUBCAMP STAFF ☐ REGIONAL ACTION CENTER

OCCUPATION _____

SCOUTING POSITIONS HELD _____

PREVIOUS JAMBOREE POSITIONS _____

Currently registered in Scouting as _____

CPR certified? ☐ Yes ☐ No Date of Youth Protection training _____

List any special skills, certifications, and qualifications, including Safe Swim Defense, Safety Afloat, and other applicable training. _____

In order of preference, list the five positions you would like to be considered for (see list on the last page of application form).

- | | | |
|----------|----------|----------|
| 1. _____ | 2. _____ | 3. _____ |
| 4. _____ | 5. _____ | |

If accepted, I agree to pay the jamboree fee and to provide transportation to and from the jamboree. **I have had a recent medical exam by a licensed health-care practitioner and know of no reason why my health would limit full jamboree participation.** If accepted, I will provide a completed Personal Health and Medical Record Form. I realize the medical report must not be dated earlier than one year prior to the start of the jamboree. I have read, understand, and agree to the conditions listed on the Jamboree Staff Understanding as shown on the reverse side of this application.

_____	_____	_____
Personal signature	Date	Parent(s) or guardian(s) signature(s), if applicant is under 18

FOR COUNCIL APPRAISAL:

	Scouting record	Positive attitude	Community participation (including religious life)	Personal appearance (including uniform and insignia)	Speaking ability	Scouting ideals (exemplifies Scout Oath and Law) to others	How adult Scouter relates to others	Adult leadership record	Camping and outdoor experiences
Excellent									
Good									
Fair									
Poor									

COUNCIL APPROVAL Date _____ REGIONAL APPROVAL Date _____ NATIONAL APPROVAL Date _____

_____	_____	_____
Scout executive	Signature	Signature

JAMBOREE STAFF UNDERSTANDING

I apply for a staff assignment at the 2005 National Scout Jamboree and will meet my responsibilities throughout the entire jamboree. I will conduct myself in accordance with the regulations of the Boy Scouts of America, participate in such preliminary jamboree training as may be required, carry out assignments given to me, and wear the official jamboree uniform. I realize that any departure from jamboree rules will constitute grounds for my dismissal from the staff.

In consideration of the benefits to be derived from my participation in the 2005 National Scout Jamboree, any and all claims against the Boy Scouts of America or its local councils; the United States of America; or any of the officers, employees, agents, or other representatives of any of them; or any other persons working under their direction or engaged in the conduct of their affairs, arising out of any accident, illness, injury, damage or other loss or harm to or incurred or suffered by the applicant named or to his or her property, in connection with or incidental to the 2005 National Scout

PAYMENT OF FEES

For all jamboree positions other than jamboree unit leaders, the 2005 National Scout Jamboree fee (see schedule at right) will be requested at the time the letter of appointment is sent to the applicant. Jamboree staff members will pay their own transportation to and from the jamboree, and will agree to participate in appropriate prejamboree training.

Applicants who have been selected for jamboree assignments will return fees as follows:

ADULTS	YOUTH	DUE BY
\$100	\$ 50	February 1, 2004 (Nonrefundable)
\$ 250	\$125	August 1, 2004
\$ 245	\$120	February 1, 2005

Make funds payable to BSA.

MEDICAL REQUIREMENTS

Weather at the jamboree is very hot and the activities very strenuous. Therefore, it is very important you drink plenty of water at the jamboree.

Physical Examination. All participants must submit certification of physical fitness on the official Personal Health and Medical Record Form, No. 67-34412. Maintenance of good health in a jamboree camp is of utmost importance, and it is with this objective in mind that the following must be enforced. (1) Participants will be expected to get a complete examination by a licensed health-care practitioner. (2) It is recommended that the examination take place not less than 15 days nor more than six months before the departure to the jamboree. (3) Participants will go through a medical screening upon arrival. In the event a staff member is found medically unfit at this time, he or she cannot serve and must return home at his or her own expense.

Immunizations. Immunization requirements are based on recommendations of the U.S. Public Health Service. All participants must provide proof of immunization for tetanus within 10 years (since 1995). In addition, youth participants must provide verification of the following immunizations since birth: (1) measles, mumps, and rubella (MMR); (2) trivalent oral polio vaccine (TOPV) (four doses recommended); and (3) diphtheria, pertussis, and tetanus (DPT).

Exceptions to Immunization on Medical Grounds. If there is a medical reason why you should not comply with vaccination requirements, obtain a statement to that effect from a physician. That statement must include specific reasons, so it can be given full consideration by the jamboree medical staff.

Medical Alert. A national jamboree can be an exhausting experience. Many activities are physically strenuous and may result in special medical support consideration. Therefore, it is necessary that the medical staff be aware of participants who have physical conditions that may require special consideration. Conditions requiring a medical alert are

Jamboree, including preliminary training and travel, are hereby expressly waived by the applicant.

This application includes my request for personal accident insurance to be purchased on my behalf. The cost of this insurance is included in the jamboree fee. It is understood that payment of claims by the insurance company or companies is contingent upon prompt reporting of claims, if any, by the participant.

I understand that the jamboree will be covered by news media and moviemaking and broadcasting companies, and I hereby consent to the use of my voice and/or likeness in the news coverage, moviemaking, or similar projects approved by the Boy Scouts of America.

I further agree to complete the 60-minute Youth Protection training, submit evidence of fitness to make this trip on the official health form signed by a licensed health-care practitioner, and obtain immunizations required.

1. Cardiac history
2. Diastolic blood pressure of 100 mmHg
3. Diabetes mellitus under treatment (with insulin or oral medication)
4. Marked obesity
5. **Acute or severe** bronchial asthma under treatment anytime during the past 24 months
6. Sickle-cell anemia, hemophilia, leukemia, or severe blood dyscrasia
7. HIV infection
8. Epileptic seizures having occurred within the past 12 months
9. Psychiatric illness under current treatment
10. Physical disability
11. Sleep apnea

In order to plan for, prepare for, and support the participants having these medical conditions, an individual evaluation of each situation by the national medical team is required. There may be instances where proper medical support at the jamboree site is impossible. **Under such circumstances, participation may be denied.**

Any person with a severe physical disability, one of the conditions listed above, or with a reason to believe he or she may be medically unfit for jamboree participation **must** submit a request for a medical alert. Photocopy both sides of the Personal Health and Medical Record Form, No. 67-34412, signed by a licensed health-care practitioner and send the copy to: Jamboree Medical Officer, S208, Boy Scouts of America, 1325 West Walnut Hill Lane, P.O. Box 152079, Irving, TX 75015-2079. The request must be submitted by February 1, 2005.

STAFF POSITIONS

JAMBOREE STAFF

RELATIONSHIPS

Chaplain
Special guests
Visitor information

INTERNATIONAL

Hosting
Operations

MEDIA/COMMUNICATIONS

Audiovisual production
Hometown News
Internal communications
Jamboree radio
Jamboree Today
Leaders Journal
National news/media
Photography
Webmaster

SPECIAL EVENTS

Arena shows
Daily ceremonies
Band (youth staff)
Order of the Arrow shows

EXHIBITS AND DISPLAYS

Arts and sciences
Boy Scouting
Boys' Life
Brownsea Island
Cub Scouting
Daily activities
Daily stage shows
Disabilities awareness
International
K2BSA
Merit Badge Midway
National exhibits
Relationships
Venturing

OUTBACK

Boating
Fishing
Scuba/snorkeling
Conservation

SUBCAMP ACTIVITIES

YOUTH PROGRAMS

Order of the Arrow
service corps
Outdoor Adventure Place
(TOAP)

CITY SERVICES

Registration
Transportation
Housing service
Lost and found
Banking
Postal services
Staff transportation
Trading posts

PUBLIC SAFETY

Security/parking
Fire protection
EMT/ambulance
Health and safety

PHYSICAL ARRANGEMENTS

Electrical
Structural
Maintenance control
Environmental
Mechanical
Warehouse/procurement
Information systems
Computer applications
Communications

FOOD SERVICE

SUBCAMP FOOD SERVICE

Receiving
Warehouse
Distribution

STAFF FOOD SERVICE

VIP meals
Staff dining halls

SPECIAL FOOD SERVICE

Kiosks

SUBCAMP AND REGIONAL ACTION CENTER STAFF

Procurement/training
Mobilization
Special needs

SUBCAMP STAFF

Chaplains
Commissary
Commissioners
Subcamp dining
Subcamp environment
Medical
Program
Youth staff

REGIONAL ACTION CENTERS

Action Alley
Air rifles
Archery
Bikathlon
Buckskin Games
Confidence Course
Motocross
Pioneering
Rappelling
Trapshooting

Please note, the greatest number of staff positions are available in food service, trading posts, and security/parking.

HOBBY, OCCUPATION, AND TRADE SKILLS (CIRCLE ALL THAT APPLY.)

Advertising
Aides (youth)
Amateur radio license
Aquatics
Boating
Canoeing
Crewing
Fishing
Lifeguard (certified)
Sailboarding
Scuba certification _____
Snorkeling
Archery
Architect
Art teacher
Auto repair
Band (specify instrument) _____
Band leader (adult)
Brownsea Island
Bicycle riding
Campfire
Camp school (specify type) _____
Carpentry
Ceremonies
Chaplain/minister
Color guard
Commissary
Commissioners
Computer software (specify) _____
Crowd control
Customer service
Disabilities Awareness Trail
Dispatchers
Drivers (must be at least 21 years old)
Bus
Car

Postal vehicle
Truck (commercial driver's license)
Drug awareness
Electrician
Electronics
EMT
Engineer (specify field) _____
Environmentalist
Exhibits and displays
Fire department
First aid (currently certified)
Food service
Forestry
Health inspector
Heavy machinery (specify) _____
International hospitality
Interpreter (specify language) _____
Inventory control
K2BSA
Law enforcement
Lighting
Medical technician
Merit Badge Midway (specify) _____
Meteorologist
Motion pictures
Newspaper production
Nurse (specify) _____
Obstacle course
Photojournalism
Digital photography
Physician
Pioneering
Pipe fitter
Plumbing
Postmaster
Program specialist (specify) _____

Propane handling
Public relations
Public utilities (specify) _____
Radio and TV production
Radio maintenance
Radio operator
Rappelling
Refrigeration repair
Registrars
Relationships
Rifles
Air
Black powder
Safety officer
Scenic design
Security
Service corps (Order of the Arrow)
Shows
Skills competition (specify) _____
Sound technician
Teacher (specify) _____
Tradesman (specify) _____
Trading post
Cashier
Sales
Security
Snack service
Transportation
Trapshooting
Typing
Volleyball
Warehouse
Weather
Whittler
Wildlife management

Please return this form with the application.