

2017 National Youth Leadership Training STAFF Application

Boy Scouts of America

Heart of Virginia Council



STAFF APPLICATION

2017 National Youth Leadership Training

Return to Gary Bryant at CD@hovcnylt.org

August 6-12, 2017



**NATIONAL YOUTH LEADERSHIP TRAINING
YOUTH STAFF APPLICATION**

This application is a statement of interest to serve as a youth staff member for NYLT 602-2017-1.

This application, when completed and returned to the course director, will be reviewed and evaluated for staff service. Selecting the staff will be a lengthy process so be patient. Once submitted the course director will confirm receipt and provide further guidance on the process.

Your parents or guardian must approve this application when the course director contacts them. Also, your unit leader will be asked to approve your service on the youth staff.

SCOUT INFORMATION

Scout's First Name: _____ Middle Initial: _____ Last Name: _____

Preferred Call-by Name: _____ Gender: _____ Date of Birth: _____

Address: _____ City: _____ State: _____ ZIP: _____

Telephone: _____ Scout's Email address: _____

Troop/Crew #: _____ Current Rank: _____ Current Leadership Position: _____

Past Leadership Roles and Scouting Awards: _____

Attended NYLT: As Participant (Year): _____; As Staff (Year[s]): _____

Past Staff Role(s): _____

Any Physical / Medical Limitations or Restrictions? ___No ___Yes; If YES, the course director will contact you to discuss your issues privately. If you can attend summer camp, we can accommodate your dietary issues. These will be addressed later in the course preparation process.

See <http://hovcnylt.org/> for more on the Heart of Virginia NYLT course.

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“I ask to be selected as a Staff member for the Heart of Virginia Council NYLT program. If selected I will do all that I can to be a great Staff member and to pass on my knowledge and skills to my fellow Scouts. I understand that I must attend all trainings as well as the entire course. On my honor as a Scout, I promise that I will represent my Troop/Crew/Ship with honor and will faithfully live according to the Scout Oath and Scout Law while involved in National Youth Leadership Training and thereafter.”

Staff applicant signature: _____ Date: _____

Applicant's Printed Name: _____

Parent's Printed Name: _____

Parent Email Address: _____

Daytime Telephone #: _____ Evening Telephone #: _____

Comments: _____

If your unit is not Heart of Virginia Council please provide the information below. The course director has access to unit leader contact information for HOVC units.

Council: _____

Unit Leader Name: _____ Email: _____

Daytime Telephone #: _____ Evening Telephone #: _____

Returning Instructions:

Scan the completed / signed form and email to CD@hovcnylt.org

Hand carry / mail to the council service center. Place in an envelope marked “NYLT STAFF” and the office staff will ensure its delivery.

You should receive confirmation of receipt via email within a couple days.