



NATIONAL CAMP
ACCREDITATION PROGRAM

Council Application for Authorization to Operate

Council Name: _____

Council No.: _____

A. **Identification.** Identify all Council owned/leased, and council operated camp properties used for BSA camping/program purposes

| CAMP PROPERTIES AND ADDRESSES | | Long-term Cub Scout | Long-term Scouts BSA | Long-term Venturing | COPE/Climbing | Short-term Camps | Day Camp | Non-Scout Rentals |
|---|--|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| Name: | | | | | | | | |
| Address | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Name: | | | | | | | | |
| Address | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Name: | | | | | | | | |
| Address | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Name: | | | | | | | | |
| Address | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Name: | | | | | | | | |
| Address | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| List programs not associated with a council owned/leased property: | | | | | | | | |
| a. | | | | | | | | |
| b. | | | | | | | | |

If more space is needed please add additional sheets)



- B. **Council Sustainability Data.** For each council, complete the Council Sustainability Data Sheet. This document will provide a four-year history of your council's membership and financial data.
- C. **Camp Property Sustainability Data.** For each long-term camp program and/or camp property the council wants authorized, fill out a Camp Property Sustainability Data Sheet. This form will give a historic overview of a specific camp property and how it has performed for the four previous years. If numerous programs occur at this property, include them in the data.
- D. **Camp Facilities Evaluation Tool.** For each camp property, complete the Camp Facilities Evaluation Tool (CFET). Include photos of the buildings, both inside and out, and all information in a form that best fits the needs of the council.
- E. **Camp Strategic Improvement Plan (4 to 7 years).** For each long-term camp program and/or camp property the council wants authorized, complete this structured approach of reviewing the areas of strength and areas for improvement, and build a long-term plan for improvement. The council should plan to continuously revisit, evaluate, and revise the plan in preparation for reporting the status in the council's Third-Year Interim Report.
- F. **NCAP Council Sustainability Commitment Form.** For council, complete the Council Sustainability Commitment Form that identifies the council's commitment to financial sustainability.

| G. WHAT TO TURN IN | WHAT IS NEEDED |
|--|---|
| <input type="checkbox"/> Council Sustainability Data Sheet | 1 for the council |
| <input type="checkbox"/> Camp Property Sustainability Data Sheet | 1 for each long-term camp program and/or camp property that the council wants authorized. |
| <input type="checkbox"/> Camp Facilities Evaluation Tool | 1 for every camp property you want authorized |
| <input type="checkbox"/> Camp Strategic Improvement Plan | 1 for each long-term camp program and/or camp property that the council wants authorized. |
| <input type="checkbox"/> Council Sustainability Commitment Form | 1 for the council. |

This application sets forth the council's plan for operating a high-quality, safe, and inspiring camp program and for demonstrating compliance with BSA national camp standards and will form the basis of the Authorization to Operate and the level of accreditation issued for the camp(s).

ALL PARTS of this application must be submitted in a timely manner. All information should be submitted electronically to NCAP@scouting.org. Please see the accompanying instructions on the website for additional clarification.

We certify that the council's executive board or executive committee has authorized this application and the commitments proposed, which shall be binding upon the council.

Date of executive board or executive committee action: _____

Signature of council NCAP Chair: _____

Typed name of the NCAP Chair: _____

Email address of NCAP chair: _____

Signature of council President: _____

Typed name of the President: _____

Email address of President: _____

Signature of Scout Executive: _____

Typed name of the Scout Executive: _____

Email address of Scout Executive: _____

Date of submission of application: _____