



Application for Continuing Education Certification for Resident Camp or Resident Program Director (Check One)

Name of Applicant: _____

Council Name: _____ Council #: _____

Date and location of most recent NCS certification:

Date: _____ Location: _____

Requirement 1:

List years served as camp director or program director (at least three seasons): 1. _____ 2. _____ 3. _____

Requirement 2: List years involved in NCAP Assessment Process: 1. _____ 2. _____ 3. _____ 4. _____ 5. _____

What new skill have you learned/acquired since attending National Camping School during this continuing education recertification process? How have you used these skills to improve your camp? (Use additional sheet as necessary.)

Requirement 3:

Please indicate in each row below the year and which continuing education option was completed for each of the 5-years of NCS certification tenure. Example: Year 2 - 2022 | 3C - Attended ACA conference. Sign below to certify.

Fill in the year below.	List the requirement that was completed.
Year 1 -	1A - Attended or Served on staff of NCS (Resident Camp Director or Resident Program Director section)
Year 2 -	
Year 3 -	
Year 4 -	
Year 5 -	

I, the applicant above, certify that I have completed the above continuing education requirements.

Applicant Signature _____

Council Approval by _____ Date: _____

Scout Executive or designee signature

Submit this application to National Camping School at NCS@Scouting.org to be processed and approved. Local council will be billed \$250 once the application is processed and approved. (Allow 4 weeks to be processed)

For internal use only:

Date of Verification: _____ Verified by: _____

Date attended online recertification training: _____

Committee review date: _____

Application is: APPROVED: _____ DENIED: _____ (Reason) _____

If denied, date sent to applicant: _____