

# BOY SCOUTS OF AMERICA

## ADULT APPLICATION

The information obtained in this form is for the internal use of the BSA only.

**UNIT SCOUTERS**

Check one

Pack No. \_\_\_\_\_

Troop No. \_\_\_\_\_

Team No. \_\_\_\_\_

Crew No. \_\_\_\_\_

Ship No. \_\_\_\_\_

**COUNCIL/DISTRICT/DIVISION SCOUTERS**

Council/District/Division position

Merit Badge Counselor

District name

Black Creek

EXPIRE DATE \_\_\_\_\_ TERM \_\_\_\_\_ MONTHS New leader  Former leader

If applicant has an unexpired membership certificate, registration may be accomplished in this unit by paying \$1 for processing the transfer. Check the box and attach certificate. It will be returned by the council.

TRANSFER FROM: COUNCIL NO. \_\_\_\_\_ UNIT TYPE \_\_\_\_\_ UNIT NO. \_\_\_\_\_

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

First name (No initials or nicknames) \_\_\_\_\_ Middle name \_\_\_\_\_ Last name \_\_\_\_\_ Suffix \_\_\_\_\_

Social Security Number (required) \_\_\_\_\_ Country \_\_\_\_\_

Have you completed:  Youth Protection training  Fast Start training

Mailing address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip code \_\_\_\_\_

Home phone \_\_\_\_\_ Business phone \_\_\_\_\_ Date of birth mm-dd-yyyy \_\_\_\_\_

Ethnic background (Please mark the appropriate box.)

African American  American Indian  Alaska Native  Asian

Caucasian  Hispanic/Latino  Pacific Islander  Other

Driver's license no. \_\_\_\_\_ State \_\_\_\_\_ Expiration \_\_\_\_\_

Sex \_\_\_\_\_ Occupation \_\_\_\_\_ Employer \_\_\_\_\_

Are you an Eagle Scout? Yes  No  Date earned mm-dd-yyyy \_\_\_\_\_

Business address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip code \_\_\_\_\_

E-mail address \_\_\_\_\_

Program \_\_\_\_\_ Position code 42 Position (Description) Merit Badge Counselor Boys' Life

Business  Home  Home Page

1. Scouting background.

Position	Council	Year

2. Experience working with youth in other organizations.

3. Previous residences (for last five years).

City	State

4. Current memberships (religious, community, business, labor, or professional organizations).

5. References. Please list those who are familiar with your character as it relates to working with youth. References will be checked when necessary.

Name \_\_\_\_\_ Telephone ( ) \_\_\_\_\_

Name \_\_\_\_\_ Telephone ( ) \_\_\_\_\_

Name \_\_\_\_\_ Telephone ( ) \_\_\_\_\_

Registration fee \$ \_\_\_\_\_ Boys' Life fee \$ \_\_\_\_\_

6. Additional information. (circle each answer)

a. Do you use illegal drugs? Yes No

b. Have you ever been convicted of a criminal offense? (If yes, explain below.) Yes No

c. Have you ever been charged with child neglect or abuse? Yes No

d. Has your driver's license ever been suspended or revoked? (If yes, explain below.) Yes No

e. Other than the above, is there any fact or circumstance involving you or your background that would call into question your being entrusted with the supervision, guidance, and care of young people? (If yes, explain below.) Yes No

I understand that:

a. The information that I have provided may be verified, if necessary, by contacting persons or organizations named in this application, or by contacting any person or organization that may have information concerning me, or by conducting a criminal background check. I hereby release and agree to hold harmless from liability any person or organization that provides information. I also agree to hold harmless the chartered organization, local council, Boy Scouts of America, and the officers, employees, and volunteers thereof.

b. In signing this application, I have read the attached information and apply for registration with the Boy Scouts of America. I agree to comply with the Charter and Bylaws, and the Rules and Regulations of the Boy Scouts of America and the local council. I affirm that the information I have given on this form is true and correct. I will follow the Youth Protection guidelines.

**X** Signature of applicant \_\_\_\_\_ Date \_\_\_\_\_

**APPROVALS FOR UNIT SCOUTERS**

We are unaware of anything contrary to the information stated in this application. This application has been reviewed according to BSA procedures and this applicant meets the leadership qualifications of the Boy Scouts of America:

Signature of unit committee chairman \_\_\_\_\_

Date \_\_\_\_\_

Signature of chartered organization head or chartered organization representative \_\_\_\_\_

Date \_\_\_\_\_

**ACCEPTED.**

Signature of Scout executive or designee \_\_\_\_\_

Date \_\_\_\_\_

**APPROVAL FOR COUNCIL, DISTRICT, AND DIVISION SCOUTERS**

We are unaware of anything contrary to the information stated in this application. This application has been reviewed according to BSA procedures and this applicant meets the leadership qualifications of the Boy Scouts of America:

Signature of Scout executive or designee \_\_\_\_\_

Date \_\_\_\_\_

Retain on file for three years.

**LOCAL COUNCIL COPY**