

Signature____

Boy Scouts of America MERIT BADGE COUNSELOR INFORMATION



(Please type or print legibly.)

Name*		_ Primary phone*		$\ \ \square Home$	Cell	Work	
Address*		Other phone		Home	Cell	Work	
City/state/zip*		Other phone		Home	Cell	Work	
Email address*			☐ I do not have email.		Age		
District	Unit:	☐ Troop ☐ Team	☐ Crew ☐ Ship No	BS	A ID		
I am not affiliated with a district.		☐ I am not affiliated v	vith a unit.				
*Required field. Primary phone and email	address indi	icate how Scouts shoul	d contact you.				
 To qualify as a merit badge counselor, Be at least 18 years old and of good c Be registered with the Boy Scouts of Ar Complete Youth Protection training. Be recognized as having the skills and badge subjects covered and hold any and training as outlined in the Guide to Guide to Advancement—or use others Be able to work with Scout-age boys. 	haracter. merica (posit I education i required qua o Safe Scou	• For del star star star star star star star star	merit badge counselor, I low the requirements of the etions or additions, ensurndards are fair and unifor we a Scout accompanied tructional sessions. ep my Youth Protection transer my registration annual	ne merit ba ing that the m for all So by his budo aining curre	advance couts. dy during a	ement all	
Merit Badges For more than eight merit badges, attach additional sheets.	Add (A) Drop (D) For each merit badge, list qualification(s) that support your request. Qualifications could include college degrees, formal training certificates, positions held, and specific life experiences.						
1.			•	•			
2.							
3.							
4.							
5.							
6.							
7.							
8.							
 A = Adding a new merit badge that you will complete the following: This is a new application (first time to Attach this form to the BSA Adult Applements of the BSA and the standard of the stan	register as a	a merit badge counsel icating position code 4		this merit ba	adge.		
I no longer wish to serve as a merit badge counselor.			Council Approva	Council Approval:			
Youth Protection training date			Name (print)	Name (print)			
(Attach copy of the current certificate.)			Position	Position			
I agree to work with: All Scouts All Scouts in these districts: Only with Scouts in these units (indicate)	ate whether	troop, team, or crew):	Date				
Counselors are encouraged to be available							
I plan to serve as a merit badge coun	selor for this	s event or outside orga	nızatıon:				

_____Date ___