BOY SCOUTS OF AMERICA
ADULT APPLICATION

This application is also available in Spanish.
Esta solicitud también está disponible en español.

The mission of the Boy Scouts of America is to prepare young people to make ethical and moral choices over their lifetimes by instilling in them the values of the Scout Oath and Scout Law.

In a Cub Scout pack, Boy Scout troop, Varsity Scout team, Venturing crew, or Sea Scout ship—or in any position in a district or council—your participation is a service to your community and helps youth become better citizens.

As members of the Boy Scouts of America, high-quality adult leaders are important role models for youth. This application helps the chartered organization to select qualified leaders to serve as volunteers. Thank you for completing this application in full. See instructions on the inside cover.

BY SUBMITTING THIS APPLICATION YOU ARE AUTHORIZING A CRIMINAL BACKGROUND CHECK OF YOURSELF. THIS CHECK WILL BE MADE FROM PUBLIC RECORD SOURCES. YOU WILL HAVE AN OPPORTUNITY TO REVIEW AND CHALLENGE ANY ADVERSE INFORMATION DISCLOSED BY THE CHECK.

IF YOU WOULD LIKE A COPY OF YOUR CRIMINAL BACKGROUND REPORT, PLEASE CONTACT YOUR LOCAL COUNCIL OFFICE.

Youth Protection Training

All applicants for membership are required to take this training within 30 days of registering. To take it online, go to www.MyScouting.org and establish an account using the member number you receive when you register. If you take the training online before you obtain a member number, be sure to return to MyScouting and enter your number for training record credit. Your BSA local council also provides training on a regular basis if you cannot take it online.

For more information, refer to the back of this application.

BOY SCOUTS OF AMERICA®

Purpose of the Boy Scouts of America

The purpose of the Boy Scouts of America is to promote, through cooperation with other agencies, the ability of youth to do things for themselves and others, and to teach youth patriotism, courage, self-reliance, and kindred virtues. In achieving this purpose, emphasis is placed upon the Boy Scouts of America's educational program and its oaths, promises, and codes for character development, citizenship training, and mental and physical fitness.

Excerpt From Declaration of Religious Principle

The Boy Scouts of America maintains that no member can grow into the best kind of citizen without recognizing an obligation to God and, therefore, recognizes the religious element in the training of the member, but it is absolutely nonsectarian in its attitude toward that religious training. Its policy is that the home and organization or group with which the member is connected shall give definite attention to religious life. Only persons willing to subscribe to these precepts from the Declaration of Religious Principle and to the Bylaws of the Boy Scouts of America shall be entitled to certificates of leadership.

Leadership Requirements

The applicant must possess the moral, educational, and emotional qualities that the Boy Scouts of America deems necessary to afford positive leadership to youth. The applicant must also be the correct age, subscribe to the precepts of the Declaration of Religious Principle, and abide by the Scout Oath or Promise, and the Scout Law.

APPROVAL REQUIRED—UNIT SCOUTERS

Unit committee chairman approves all adult unit members except the chartered organization representative and committee chairman.

Chartered organization head or chartered organization representative. The chartered organization representative is approved by the head of the chartered organization. Following approval by the unit committee chairman, all other adult unit members must be approved by the head of the chartered organization or the chartered organization representative.

Scout executive or designee must approve all unit Scouters.

APPROVAL REQUIRED—COUNCIL and DISTRICT SCOUTERS

Scout executive or designee must approve all council and district Scouters.

***Scouting* magazine.** This magazine is sent to all registered, paid adult members.

Boys' Life. Registered adults get a special rate of $12 a year (half the regular rate of $24 a year). For a subscription to a great magazine and up-to-date information on boys and Scouting, just attach the appropriate amount and fill in the *Boys' Life* circle. Please calculate and remit the appropriate state and local taxes. On late registrations it may be necessary to deliver back issues.

Qualification. Adult citizens, or adult noncitizens who reside within the country, may register with the Boy Scouts of America in any capacity if they agree to abide by the Scout Oath or Promise and the Scout Law, to respect and obey the laws of the United States of America, and to subscribe to the precepts of the Declaration of Religious Principle. All leaders must be 21 years of age or older, except assistant Scoutmasters, assistant den leaders, assistant Cubmasters, assistant Webelos den leaders, and assistant Varsity Scout coaches, who must be 18 or older. No one may register in more than one position in the same unit, except the chartered organization representative (who can multiple only as the committee chairman (CC) or a committee member (MC)) and the ScoutParent unit coordinator (who may multiple as chartered organization representative (CR), assistant den leader (DA), assistant Webelos den leader (WA), assistant Scoutmaster (SA), assistant Varsity Scout Coach (VA), mate (MT), and Leader of 11-year-old Scouts (10)).

Youth Protection. Child abuse is a serious problem in our society, and unfortunately, it can occur anywhere, even in Scouting. Youth safety is of paramount importance to Scouting. For that reason, the BSA continues to create barriers to abuse beyond what have previously existed in Scouting.

All persons involved in Scouting shall report to local authorities any good-faith suspicion or belief that any child is or has been physically or sexually abused, physically or emotionally neglected, exposed to any form of violence or threat, exposed to any form of sexual exploitation including the possession, manufacture, or distribution of child pornography; online solicitation; enticement; or showing of obscene material. No person may abdicate this reporting responsibility to any other person.

Notify your Scout executive of this report, or of any violation of BSA's Youth Protection policies, so that he or she may take appropriate action for the safety of our Scouts, make appropriate notifications, and follow up with investigating agencies.

Ethnic Background Information. The BSA receives inquiries from various agencies regarding racial composition. Please fill in the appropriate circle on the application to indicate ethnic background.

BSA Privacy Policy. The Boy Scouts of America protects the confidentiality of the names and personal information of those who are affiliated with the movement. No commercial or unauthorized use is made of the names, addresses, and other confidential information of members. Access to this information is strictly limited.

This application is designed to be an information-gathering aid. Answers given by the applicant may be verified.

INSTRUCTIONS

Unit Scouters

1. Complete and sign the top copy. Keep the back copy (applicant copy) and give the remaining copies to the committee chairman with the proper fees.
2. After the application has been reviewed and, if necessary, references checked by the unit committee, secure the approvals. The process set forth in the publication *Selecting Quality Leaders,* No. 522-981, must be completed for all positions of Scoutmaster, assistant Scoutmaster, Varsity Coach, and assistant Varsity Coach.
3. The committee chairman keeps the unit copy, gives one copy to the chartered organization, and forwards the remaining copy to the local council service center for approval and processing.

Council and District Scouters

1. Complete and sign the application.
2. Send the proper fee and all three copies of the application to the local council service center for approval and processing.

FEE CHART

Months	Registration	*Boys' Life*
1	1.25	—
2	2.50	2.00
3	3.75	3.00
4	5.00	4.00
5	6.25	5.00
6	7.50	6.00
7	8.75	7.00
8	10.00	8.00
9	11.25	9.00
10	12.50	10.00
11	13.75	11.00
12	15.00	12.00

UNIT POSITION CODE

CR	Chartered organization representative
CC	Committee chairman
MC	Committee member
SM	Scoutmaster
SA	Assistant Scoutmaster
NL	Crew Advisor
NA	Crew associate Advisor
SK	Skipper
MT	Mate
VC	Varsity Scout Coach
VA	Assistant Varsity Scout Coach
CM	Cubmaster
CA	Assistant Cubmaster
WL	Webelos den leader
WA	Assistant Webelos den leader
DL	Den leader
DA	Assistant den leader
TL	Tiger Cub den leader
PT	Pack trainer
PC	ScoutParent unit coordinator
10	Leader of 11-year old Scouts (LDS Troop)
88	Lone Cub Scout friend and counselor
96	Lone Scout friend and counselor

ScoutParents (PS) and Tiger Cub adult partners (AP) complete the bottom portion of the youth application.

Tips for completing the Application for Adult Membership:
(Use blue or black ink)

- ➢Print—do not use cursive.
- ➢Use black or dark blue ink.
- ➢Press firmly when printing.
- ➢Print one letter only in each box.
- ➢Use upper-case letters and stay within the blue boxes for legibility.
- ➢Fill in circles; do not use check marks.
- ➢Make sure you have all needed signatures on application.
- ➢Don't alter the application—it could affect the quality of the scan.

Mailing address example:

7	0	3		F	I	R	S	T		S	T	

Instructions:

Please read the Disclosure/Authorization Form on the back of this page. In the space provided at the bottom of the statement, fill in the spaces for your name, signature, and date to acknowledge your review of the form.

This Disclosure/Authorization Form and the Boy Scouts of America Adult Application must be signed and turned in together to complete the application process.

DISCLOSURE/AUTHORIZATION FORM

NOTICE TO APPLICANT REGARDING BACKGROUND CHECK

In order to safeguard the youth in our program, the Boy Scouts of America will procure consumer reports on you in connection with your application to serve as a volunteer, and the Boy Scouts of America may procure additional consumer reports at any time during your service as a volunteer in order to evaluate your continued suitability for volunteer service. The Boy Scouts of America has contracted with LexisNexis, a consumer reporting agency, to provide the consumer reports. LexisNexis may be contacted by mail at LexisNexis, 1000 Alderman Drive, Alpharetta, GA 30005 or by telephone at 800-845-6004.

The consumer reports may contain information bearing on your character, general reputation, personal characteristics, and mode of living. The types of information that may be obtained include but are not limited to Social Security number verification, sex offender registry checks, criminal records checks, inmate records searches, and court records checks. The information contained in these consumer reports may be obtained by LexisNexis from public record sources. **The consumer reports will not include credit record checks or motor vehicle record checks.**

The nature and scope of the consumer reports are described above. Nonetheless, you are entitled to request a complete and accurate disclosure of the nature and scope of such reports by submitting a written request to LexisNexis at the address listed above. Additional notices for applicants in California, New York, Minnesota, and Oklahoma are provided.

APPLICANT'S ACKNOWLEDGMENT AND AUTHORIZATION

I have carefully read this notice and authorization form and I hereby authorize the Boy Scouts of America and LexisNexis to procure a consumer report, which as described above will include information relating to my criminal history as received from reporting agencies. I understand that this information will be used to determine my eligibility for a volunteer position with the Boy Scouts of America. I also understand that as long as I remain a volunteer, additional consumer reports may be procured at any time. I understand that if the Boy Scouts of America chooses not to accept my application or to revoke my membership based on information contained in a consumer report, I will receive a summary of my rights under the Fair Credit Reporting Act and contact information for the reporting agency, LexisNexis.

ADDITIONAL NOTICES TO CALIFORNIA, MINNESOTA, OKLAHOMA, AND NEW YORK APPLICANTS

California

Under California law, the consumer reports described above that the Boy Scouts of America will procure on you are defined as investigative consumer reports. These reports will be procured in connection with your application to serve as a volunteer, and additional reports may be procured at any time during your service as a volunteer in order to evaluate your continued suitability for volunteer service. The reports may include information on your character, general reputation, personal characteristics, and mode of living.

Under section 1786.22 of the California Civil Code, you may inspect the file maintained on you by LexisNexis, during normal business hours and with proper identification. You may also obtain a copy of this file, upon submitting proper identification and paying the costs of duplication, by appearing at LexisNexis offices in person, during normal business hours and on reasonable notice, or by certified mail upon making a written request. You may also receive a summary of the information contained in this file by telephone. LexisNexis will provide trained personnel to explain any information furnished to you and will provide a written explanation of any coded information. This written explanation will be provided whenever a file is provided to you for visual inspection. If you appear in person, you may be accompanied by one other person of your choosing, who must furnish reasonable identification.

For Applicants in California, Minnesota, and Oklahoma Only

You have the right to request a free copy of any report procured on you. If you wish to receive a free copy of any report procured on you, check the box below.

❑ I request a free copy of any report procured on me.

New York

As explained above, a consumer report will be requested in connection with your application, and additional consumer reports may be requested during the course of your service with the Boy Scouts of America. You have the right, upon request, to be informed whether or not a consumer report was requested and, if a consumer report was requested, of the name and address of the consumer reporting agency that furnished the consumer report.

My signature below indicates that I have read, understand, and accept the accompanying disclosures and acknowledgments.

First name **(No initials or nicknames) Please print.**

Middle name

Last name

Suffix

Signature of applicant

Date

Unit No.

ADULT APPLICATION

524-501

This form is read by machine. Please print the numbers and letters as shown: 1 2 3 4 5 6 7 8 9 0 A B C D E F G H I

UNIT SCOUTERS **(Fill in the circle.)**

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

○ Pack ○ Troop ○ Team ○ Crew ○ Ship Unit No. _____ OR

Council/district position _____

District name _____

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. Mark and attach certificate. It will be returned by the council.

TRANSFER FROM: COUNCIL NO. _____ TYPE OF UNIT _____ UNIT NO. _____

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

First name **(No initials or nicknames)** Middle name Last name Suffix

Have you completed: ○ Youth Protection training ○ Fast Start training

Country Mailing address City State Zip code

US

Home phone ___ - ___ - ____ Business phone ___ - ___ - ____ Ext. ____ Cell phone ___ - ___ - ____

Date of birth (mm/dd/yyyy) __ / __ / ____

Ethnic background:
○ Black/African American ○ Native American ○ Alaska Native ○ Asian
○ Caucasian/White ○ Hispanic/Latino ○ Pacific Islander ○ Other

Driver's license No. State

Gender ○ M ○ F

Social Security No. **(required)** ___ - __ - ____

Occupation Employer

Country Business address City State Zip code

US

Position Code Scouting position (description)

Are you an Eagle Scout? ○ Yes ○ No Date earned (mm/dd/yyyy) __ / __ / ____

E-mail address **(Select one)** ○ Work ○ Home _____ @ _____

○ ***Boys' Life*** **subscription**

I understand that:
a. The information that I have provided may be verified, 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 am aware of and agree to follow the BSA's Youth Protection policies and will complete Youth Protection training within 30 days of registering.

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 BSA.

Signature of unit committee chairman Date

Signature of chartered organization head or representative Date

(ACCEPTED) Signature of Scout executive or designee Date

APPROVAL FOR COUNCIL AND DISTRICT 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 BSA:

Signature of Scout executive or designee Date

All questions must be answered.

1. Scouting background.
Position Council Year

2. Experience working with youth in other organizations. Please provide contact information.

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 may be checked.
Name _____
Telephone (____) _____
Name _____
Telephone (____) _____
Name _____
Telephone (____) _____

6. Additional information. (Mark each answer.) Yes or No

a. Do you use illegal drugs? ○ ○
b. Have you ever been convicted of a criminal offense? (If yes, explain below.) ○ ○
c. Have you ever been charged with, or investigated or arrested for, child neglect or abuse? ○ ○
d. Has your driver's license ever been suspended or revoked? (If yes, explain below.) ○ ○
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 answer is yes, explain below.) ○ ○

4001

Registration fee $ __.__

Boys' Life fee $ __.__

LOCAL COUNCIL COPY

Retain on file for three years.

ADULT APPLICATION

524-501

UNIT SCOUTERS **(Fill in the circle.)**

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

○ Pack ○ Troop ○ Team ○ Crew ○ Ship Unit No. _____ OR

Council/district position _____

District name _____

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. Mark and attach certificate. It will be returned by the council.

TRANSFER FROM: COUNCIL NO. _____ TYPE OF UNIT _____ UNIT NO. _____

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

First name **(No initials or nicknames)** | Middle name | Last name | Suffix

Have you completed: ○ Youth Protection training ○ Fast Start training

Country | Mailing address | City | State | Zip code

US

Home phone - - | Business phone - - - X Ext. | Cell phone - -

Date of birth (mm/dd/yyyy) __ __ / __ __ / __ __ __ __

Ethnic background: ○ Black/African American ○ Native American ○ Alaska Native ○ Asian ○ Caucasian/White ○ Hispanic/Latino ○ Pacific Islander ○ Other

Driver's license No. | State

Gender ○ M ○ F

Social Security No. **(required)** [redacted]

Occupation | Employer

Country | Business address | City | State | Zip code

US

Position Code | Scouting position (description)

Are you an Eagle Scout? ○ Yes ○ No Date earned (mm/dd/yyyy) __ __ / __ __ / __ __ __ __

E-mail address **(Select one)** ○ Work ○ Home _____ @ _____

○ ***Boys' Life*** **subscription**

I understand that:
a. The information that I have provided may be verified, 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 am aware of and agree to follow the BSA's Youth Protection policies and will complete Youth Protection training within 30 days of registering.

Signature of applicant Date

Registration fee $ __ __ . __ __

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 BSA.

Signature of unit committee chairman Date

Signature of chartered organization head or representative Date

(ACCEPTED) Signature of Scout executive or designee Date

Boys' Life fee $ __ __ . __ __

CHARTERED ORGANIZATION COPY

APPROVAL FOR COUNCIL AND DISTRICT 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 BSA:

Signature of Scout executive or designee Date

Retain on file for three years.

All questions must be answered.

1. Scouting background.
   Position Council Year
   _____
   _____
   _____
2. Experience working with youth in other organizations. Please provide contact information.
   _____
   _____
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 may be checked.
   Name _____
   Telephone (_____)_____
   Name _____
   Telephone (_____)_____
   Name _____
   Telephone (_____)_____
6. Additional information. (Mark each answer.) Yes or No
   a. Do you use illegal drugs? ○ ○
   b. Have you ever been convicted of a criminal offense? (If yes, explain below.) ○ ○
   c. Have you ever been charged with, or investigated or arrested for, child neglect or abuse? ○ ○
   d. Has your driver's license ever been suspended or revoked? (If yes, explain below.) ○ ○
   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 answer is yes, explain below.) ○ ○
   _____
   _____
   _____

ADULT APPLICATION

524-501

UNIT SCOUTERS **(Fill in the circle.)**

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

○ Pack ○ Troop ○ Team ○ Crew ○ Ship Unit No. _____ OR

Council/district position _____

District name _____

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. Mark and attach certificate. It will be returned by the council.

TRANSFER FROM: COUNCIL NO. _____ TYPE OF UNIT _____ UNIT NO. _____

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

First name **(No initials or nicknames)** | Middle name | Last name | Suffix

Have you completed: ○ Youth Protection training ○ Fast Start training

Country | Mailing address | City | State | Zip code

US

Home phone ___ - ___ - ____ Business phone ___ - ___ - ____ Ext. ____ Cell phone ___ - ___ - ____

Date of birth (mm/dd/yyyy) __ / __ / ____

Ethnic background: ○ Black/African American ○ Native American ○ Alaska Native ○ Asian ○ Caucasian/White ○ Hispanic/Latino ○ Pacific Islander ○ Other

Driver's license No. | State

Gender ○ M ○ F

Social Security No. **(required)** [redacted]

Occupation | Employer

Country | Business address | City | State | Zip code

US

Position Code | Scouting position (description)

Are you an Eagle Scout? ○ Yes ○ No Date earned (mm/dd/yyyy) __ / __ / ____

E-mail address **(Select one)** ○ Work ○ Home _____ @ _____

○ ***Boys' Life*** **subscription**

I understand that:
a. The information that I have provided may be verified, 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 am aware of and agree to follow the BSA's Youth Protection policies and will complete Youth Protection training within 30 days of registering.

Signature of applicant Date

Registration fee $ ___.__

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 BSA.

Signature of unit committee chairman Date

Signature of chartered organization head or representative Date

(ACCEPTED) Signature of Scout executive or designee Date

Boys' Life fee $ ___.__

UNIT COPY

APPROVAL FOR COUNCIL AND DISTRICT 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 BSA:

Signature of Scout executive or designee Date

Retain on file for three years.

All questions must be answered.

1. Scouting background.
Position Council Year

2. Experience working with youth in other organizations. Please provide contact information.

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 may be checked.
Name _____
Telephone (____) _____
Name _____
Telephone (____) _____
Name _____
Telephone (____) _____

6. Additional information. (Mark each answer.) Yes or No

a. Do you use illegal drugs? ○ ○
b. Have you ever been convicted of a criminal offense? (If yes, explain below.) ○ ○
c. Have you ever been charged with, or investigated or arrested for, child neglect or abuse? ○ ○
d. Has your driver's license ever been suspended or revoked? (If yes, explain below.) ○ ○
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 answer is yes, explain below.) ○ ○

ADULT APPLICATION

524-501

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

UNIT SCOUTERS **(Fill in the circle.)**

○ Pack ○ Troop ○ Team ○ Crew ○ Ship Unit No. _____ OR

Council/district position _____

District name _____

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. Mark and attach certificate. It will be returned by the council.

TRANSFER FROM: COUNCIL NO. _____ TYPE OF UNIT _____ UNIT NO. _____

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

First name **(No initials or nicknames)** | Middle name | Last name | Suffix

Have you completed: ○ Youth Protection training ○ Fast Start training

Country (US) | Mailing address | City | State | Zip code

Home phone ___-___-____ | Business phone ___-___-____ X Ext. | Cell phone ___-___-____

Date of birth (mm/dd/yyyy) __/__/____ | Ethnic background: ○ Black/African American ○ Native American ○ Alaska Native ○ Asian ○ Caucasian/White ○ Hispanic/Latino ○ Pacific Islander ○ Other | Driver's license No. | State

Gender ○ M ○ F | Social Security No. **(required)** | Occupation | Employer

Country (US) | Business address | City | State | Zip code

Position Code | Scouting position (description) | Are you an Eagle Scout? ○ Yes ○ No | Date earned (mm/dd/yyyy) __/__/____

E-mail address **(Select one)** ○ Work ○ Home _____@_____

○ ***Boys' Life*** **subscription**

I understand that:
a. The information that I have provided may be verified, 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 am aware of and agree to follow the BSA's Youth Protection policies and will complete Youth Protection training within 30 days of registering.

Signature of applicant _____ Date

Registration fee $ ___.__

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 BSA.

Signature of unit committee chairman _____ Date

Signature of chartered organization head or representative _____ Date

(ACCEPTED) Signature of Scout executive or designee _____ Date

Boys' Life fee $ ___.__

APPROVAL FOR COUNCIL AND DISTRICT 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 BSA:

Signature of Scout executive or designee _____ Date

APPLICANT COPY

Retain on file for three years.

All questions must be answered.

1. Scouting background.
   Position | Council | Year
2. Experience working with youth in other organizations. Please provide contact information.
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 may be checked.
   Name _____
   Telephone (____)_____
   Name _____
   Telephone (____)_____
   Name _____
   Telephone (____)_____
6. Additional information. (Mark each answer.)

	Yes	No
a. Do you use illegal drugs?	○	○
b. Have you ever been convicted of a criminal offense? (If yes, explain below.)	○	○
c. Have you ever been charged with, or investigated or arrested for, child neglect or abuse?	○	○
d. Has your driver's license ever been suspended or revoked? (If yes, explain below.)	○	○
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 answer is yes, explain below.)	○	○

Training for New Volunteers

Trained

(Every Youth in Scouting Deserves a Trained Leader)

Welcome to Scouting! As a new Scout volunteer, you are joining our Scouting family, and we want you to understand how the program works. The Boy Scouts of America is committed to your success as a volunteer while serving young people. To help you be successful there are training materials designed for you.

So, How Do I Begin? Online or Through Your Council Service Center!

Fast Start training for Cub Scout, Boy Scout, Varsity, and Venturing leaders as well as Youth Protection training programs are available at www.myscouting.org. Additional training opportunities and resources are available through your local council and www.scouting.org/training.

All applicants for membership are required to complete Youth Protection training within 30 days of registering.

What Makes a Trained Leader? (Check when completed)

- ❑ **Cub Scout leaders** are considered trained when they have completed Youth Protection training* and Cub Scout Leader Position-Specific Training* (for their position).
- ❑ **Scoutmasters and assistant Scoutmasters** are considered trained when they have completed Youth Protection training*, Scoutmaster and Assistant Scoutmaster Leader Specific Training, and Introduction to Outdoor Leader Skills.
- ❑ **Troop committee members** are considered trained when they have completed Youth Protection training* and the Troop Committee Challenge* as their leader-specific training.
- ❑ **Varsity Scout leaders and assistants** are considered trained when they have completed Youth Protection training*, Varsity Scout Leader Specific Training, and Introduction to Outdoor Leader Skills.
- ❑ **Venturing crew Advisors, assistant Advisors, and crew committee members** are considered trained when they have completed Youth Protection training* and Venturing Leader Specific Training (and Introduction to Outdoor Leader Skills for outdoor crews only).

What Is Youth Protection Training?

We seek to create as safe an environment as possible for young people to enjoy our program's activities. The Boy Scouts of America Youth Protection training addresses strategies for personal safety awareness for youth as well as adults. Age-appropriate programs and DVD materials include:

- **Youth Protection Guidelines: Training for Volunteer Leaders and Parents—**Adults come away with a much clearer awareness of the kinds of abuse, the signs of abuse, and how to respond and report should a situation arise. Youth Protection training must be taken every two years.
- **Youth Protection Guidelines: Training for Adult Venturing Leaders—**Designed to give guidance to the leaders in our teenage coed Venturing program. Supervision and relationship issues have a different focus regarding personal safety with this age group. Youth Protection training must be taken every two years.
- **It Happened to Me—**Developed for Cub Scout–age boys from 6 to 10 years old and their parents. It addresses the four rules of personal safety: Check first, go with a friend, it's your body, and tell.
- **A Time to Tell—**A video for Boy Scout–age boys from 11 to 14 years old—the target group for most molesters. It stresses the three R's of youth protection: Recognize, Resist, and Report.
- **Youth Protection: Personal Safety Awareness—**Developed for youth ages 13 through 20 in the coeducational Venturing program. It deals with issues pertinent to this age group.

Youth Protection training is available online at www.MyScouting.org. You can establish an account there using the member number you receive when you register. If you take the online training before you receive a member number, be sure to return to MyScouting and enter your number for training record credit or forward a copy of the training certificate to your council.

The Boy Scouts of America has Youth Protection policies to protect youth, and these same policies help protect adult volunteers. These and other key policies are addressed in the training:

THE RISK ZONE
BSA RISK READY

Two-deep leadership is required on all outings.

One-on-one contact between adults and youth members is prohibited.

Privacy of youth is respected.

Separate accommodations for adults and Scouts are required.

Units are responsible to enforce Youth Protection policies.

ScoutParents has been designed to increase youth and parent recruitment, retention, advancement, participation, dedication, and a passion for Scouting. Your involvement and commitment is essential to the success of your child's Scouting experience. We encourage the parents (guardians) for each child to:

1. Participate with them.
2. Go to and observe their meetings.
3. Be part of their unit's program—both weekly meetings and outings.
4. Support the program financially.
5. Coach them on their advancement and earning of recognition awards.
6. Help in at least one support role during the year.
7. Take Youth Protection training (available online).

To learn more, go to www.scouting.org/scoutparents.

*Available online at www.myscouting.org.