

MERIT BADGE COUNSELOR APPLICATION

To be submitted to your District Advancement Chairman or Viking Council Service Center.

District: _____ Unit #: _____

Name: _____ Phone (____) _____ (____) _____
(Please Print) (Home) (Business)

Address: _____ Birthdate: _____

City: _____ State: _____ Zip: _____

If you are a *new counselor*, or wish to counsel in a new subject, please explain why you feel you are qualified to be a counselor for *each* merit badge.

MERIT BADGE	EXPLANATION OF YOUR QUALIFICATIONS
1.	
2.	
3.	
4.	
5.	

- I am a new Merit Badge Counselor. I AM NOT registered with the BSA, but an adult application form is attached. *(No registration fee required.)*
- I am a new Merit Badge Counselor. I AM currently registered with the BSA.
- My membership # is: _____ Expiration Date: _____ Position: _____
- I am currently registered as a Merit Badge Counselor and would like to add the Merit Badges listed above.

I am at least 18 years of age and meet all other current requirements of the Boy Scouts of America for Merit Badge Counselors.

Signature: _____ Date: _____

For District Staff Only:

Approved by: _____ Date: _____
(District Advancement Committee)

FOR COUNCIL USE ONLY:

Registered _____ Master Counselor List _____ Other _____