FRENCH CREEK COUNCIL – MERIT BADGE COUNSELOR INFORMATION (REV. 12/12/11)

(Please type or print)

Name ___________________________________________________ Date of Birth _____/_____/______ Business phone (_____) _________________

Address _____________________________________________________________________________ Home phone (_____) __________________

City _________________________________________State ____________ Zip code ______________ Email __________________________________

To qualify as a merit badge counselor, you must

• Be at least 18 years old
• Be proficient in the merit badge subject by vocation, avocation, or special training/
• Be able to work with Scout age boys.
• Be registered with the Boy Scouts of America

As a merit badge counselor, I agree to

• Follow the requirements of the merit badge, making no deletions or additions, ensuring that the advancement standards are fair and uniform for all Scouts.
• Have a Scout and his buddy present at all instructional sessions
• Renew my registration annually if I plan to continue as a merit badge counselor.

List merit badge subject here.

<table>
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<th>Vocation – Is this subject in line with your job, business, or profession? If yes, give brief information on the reverse side.</th>
<th>Avocation – Do you follow this subject as a hobby, having more than a “working knowledge” of the requirements? If yes, give brief information on the reverse side.</th>
<th>Special Training – If not, do you have any special training or other qualifications for this subject? If yes, give brief information in the reverse side.</th>
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Registered member of the Boy Scouts of America: YES ____ NO ____

Recommended by: __________________________________________

Home phone: (_____) ___________________

All applications MUST be accompanied by an Adult Application and enter "42" under the Position Code and copy of BSA Youth Protection Certificate. This application must be submitted 90 days prior to beginning to counsel a Merit Badge. Attach NRA certificate if required for your merit badge.

Applicants Signature __________________________________________ Date _______/_______/______

Council / District Approval ________________________________ Date _______/_______/______

Mail to:
French Creek Council, BSA
1815 Robison Road West
Erie, PA 16509