BOY SCOUTS OF AMERICA ADULT APPLICATION

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.

Quality leadership is important in the training of youth as members of the Boy Scouts of America. This application helps select the best individuals for their volunteer roles. Thank you for completing all items in this application. 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 volunteers are expected to complete Youth Protection training. It is available online on the Web site *www.scouting.org* and each local council provides training to leaders on a regular basis throughout the year.

For more information, refer to the back of the applicant copy.



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

APPROVAL REQUIRED—UNIT SCOUTERS

Unit committee chairman approves all adult personnel 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

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.

committee chairman, all other adult unit personnel 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)).

I submit my \$15 registration fee for one year, \$2 of which is to cover a subscription to *Scouting* magazine. Short-term fees are pro rata amounts as indicated.

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 are to be verified in those instances where a legitimate question arises as to his/her qualifications.

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.

| 4 5.00 4.00 VC Varsity Scout Coach 5 6.25 5.00 VA Assistant Varsity Scout Coach 6 7.50 6.00 CA Assistant Cubmaster Webelos den leader Webelos den leader 7 8.75 7.00 WA Assistant Webelos den leader 8 10.00 8.00 DA Assistant den leader 9 11.25 9.00 TL Tiger Cub den leader 10 12.50 10.00 PC ScoutParent unit coordinator 10 12.50 11.00 88 Lone Cub Scout friend and counselor 11 13.75 11.00 88 Lone Cub Scout friend and counselor 12 15.00 12.00 ScoutParents (PS) and Tiger Cub adult partners (AP) 12 15.00 12.00 ScoutParents (PS) and Tiger Cub adult partners (AP) | 1 2 3 4 | FEE CHART Registration 1.25 2.50 3.75 5.00 | Boys' Life — 2.00 3.00 4.00 | CC C MC C SM Si SA A NL C NA C SK Si MT M | unit Position code hartered organization representative ommittee chairman ommittee member coutmaster ssistant Scoutmaster rew Advisor rew associate Advisor kipper late |
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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:

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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 care, 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 |
|---|-------------|------|-----------|----------|--------|
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| Signature of applicant | | Date | | Unit No. | |

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| 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 initiats or nicknames) Middle name Last name Suffix 4. Current memberships religions. community, business, relations, community, business, allow, or professional registrations). Have you completed: What Protection training Country Mailing address City State Zip code Telephone Feet Cell phone Telephone (Name Name Name Name Telephone (Country Business address) City State Zip code Telephone (Name Name Name Name Telephone (Additional information, Vis or No (Middle scan) Country No. (Counting position (description) Are you an Eagle Sout? Oble esmeld (mindd)yyyy) Position Code Soutling position (description) Are you as Eagle Sout? Oble esmeld (mindd)yyyy) Position Code On the training or name or familiar with your character as it rolles to two codes with your character as it rolles to two codes with your character as it rolles to two codes with your character as it rolles to two codes with your character as it rolles to two codes with your character as it rolles to two codes with your character as it rolles to two codes with your character as it rolles to two codes with your character as it rolles to two codes with your character as it rolles to two codes with your character as it rolles to two codes with your character as it rolles to two codes with your character as it rolles to two codes with your character as it rolles to two codes with your character as it rolles to two codes with your character as it rolles to two codes with your character as it rolles to two codes with your character as it rolles to two codes with your character as it rolles to two | | ack Troop | Team Crew | Ship Un | | OR | } | | | |
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| (Select one) Home with the supervision, guidance, and care of young people? (If yes, | (Colort and) | | @ | | | | | | subscript | and care of young people? (If yes, |
| | I understand that: | y contacting pages - | | | nformation -1- | ated in this sasti- | ation This ser | nligation !- | an hoon ravioused | explain below.) |
| 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. | or organizations named in this application, or by contacting any person | n or organization | | | | | | | | |
| that may have minimated concerning he, or by contacting a diffinite acceptance of the contacting acceptance | I hereby release and agree to hold harmless from liability any person | or organization | | | | | | | | |
| 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 | council, Boy Scouts of America, and the officers, employees, and volu | nteers thereof. | Signature of unit comm | ittee chairman | | | | Date | APPROVAL FO | R COUNCIL AND DISTRICT SCOUTERS |
| 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. We are unaware of anything contrary to the information stated in this application. This application has been reviewed | registration with the Boy Scouts of America. I agree to comply with the | ne Charter and | | | | | | | | |
| I affirm that the information I have given on this form is true and correct. I will follow the Youth Protection guidelines. Signature of chartered organization head or representative according to BSA procedures and this applicant meets the leadership qualifications of the Boy Scouts of America: | I affirm that the information I have given on this form is true and corn | | Signature of chartered of | organization head or | representative | | | Date | | |
| | garanta | | | | | | | | | |
| Signature of applicant Date (ACCEPTED) Signature of Scout executive or designee Date Signature of Scout executive or designee Date | Signature of applicant | Date | (ACCEPTED) Signature | of Scout executive or | designee | | | Date | Signature of S | cout executive or designee Date - |
| 4001 Registration fee \$ Boys' Life fee \$ LOCAL COUNCIL COPY Retain on file for three years. | · · | 7. | , , | . South GAOUTHY OF | acoignoo | LOCAL COUN | VICII COPV | Dato | • | · |

| ADULT APPLICATION 524-501A | | | | | |
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| | UNIT SCOUTERS (Fill in th | e circle.) | Council/district positi | on | Scouting background. Position Council Year |
| The information obtained in this form is for the internal use of the BSA only. | k Troop Team Crew | Ship Unit No. | OR | | |
| | | | District name | | Experience working with youth in other |
| EXPIRE DATE / / / | TERM MONTHS Ne | w leader Former leader | | | organizations. |
| If applicant has an unexpired membership certificate; registration | may be accomplished in this unit by paying | \$1 for processing the transfer. Mark and atta | ach certificate. It will be returned | by the council. | Previous residences (for last five years). City State |
| TRANSFER FROM: COUNCIL NO. | TYPE OF UNIT | UNIT NO. | | | City State |
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| Have you completed: Youth Protection training | Fast Start training | | | | 5. References. Please list those who are familiar |
| Country Mailing address | City | 1 | State | Zip code | with your character as it relates to working with youth. References will be checked when |
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| | | Yes | No / | 1 | e. Other than the above, is there any fact or circumstance involving you or your background that would call |
| E-mail address Work (Select one) Home | @ | | | Boys' Life subscription | into question your being entrusted with the supervision, guidance, and care of young people? (If yes, |
| I understand that: | APPROVALS FOR UNIT | SCOUTERS | | | explain below.) |
| a. The information that I have provided may be verified, if necessary, by co or organizations named in this application, or by contacting any person or | contacting persons We are unaware of any | rthing contrary to the information stated in the | | | |
| that may have information concerning me, or by conducting a criminal ba I hereby release and agree to hold harmless from liability any person or or | ackground check. | ., | | | |
| that provides information. I also agree to hold harmless the chartered orga- council, Boy Scouts of America, and the officers, employees, and voluntee | ganization, local | nittee chairman | Date | | |
| b. In signing this application, I have read the attached information and ar registration with the Boy Scouts of America. I agree to comply with the C | pply for | muce originali | Date | We are unaware of | JNCIL AND DISTRICT SCOUTERS anything contrary to the information |
| Bylaws, and the Rules and Regulations of the Boy Scouts of America and I affirm that the information I have given on this form is true and correct. | d the local council. . I will follow the | | _ | according to BSA pr | ation. This application has been reviewed occdures and this applicant meets the |
| Youth Protection guidelines. | Signature of chartered | organization head or representative | Date | leadership qualificat | tions of the Boy Scouts of America: |
| Signature of applicant | Date (ACCEPTED) Signature | of Scout executive or designee | Date | Signature of Scout e | executive or designee Date |
| Registration fee \$ | Boys' Life fee \$ | | D ORGANIZATION COPY | Retain on file for three | • |

ADULT APPLICATION 524-501A UNIT SCOUTERS (Fill in the circle.) Council/district position Scouting background. Position Year The information obtained in this form is for the Pack Troop Ship Team Crew OR internal use of the BSA only. District name 2. Experience working with youth in other **EXPIRE DATE** MONTHS organizations. 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. 3. Previous residences (for last five years). City State TYPE OF UNIT TRANSFER FROM: COUNCIL NO. UNIT NO. Please print one letter in each space—press hard; you are making three copies. Suffix First name (No initials or nicknames) Middle name Last name 4. Current memberships (religious, community, business, labor, or professional organizations). Have you completed: Fast Start training Youth Protection training 5. References. Please list those who are familiar with your character as it relates to working Country Mailing address City State Zip code with youth. References will be checked when necessary. Name Telephone (Home phone Business phone Fxt. Cell phone Name Telephone (Name State Date of birth (mm/dd/yyyy Ethnic background: Driver's license No. Telephone (Black/African American Native American Alaska Native Asian 6. Additional information. Yes or No Caucasian/White Hispanic/Latino Pacific Islander (Mark each answer.) \circ Gender Social Security No. (required) Occupation **Employer** a. Do you use illegal drugs? b. Have you ever been convicted of O \bigcirc M a criminal offense? (If yes, explain below.) Country **Business address** City State Zip code c. Have you ever been charged with child neglect or abuse? d. Has your driver's license ever been suspended or revoked? Position Code Scouting position (description) Are you an Eagle Scout? Date earned (mm/dd/yyyy) (If yes, explain below.) e. Other than the above, is there any fact or circumstance involving you O or your background that would call into question your being entrusted E-mail address Work Bovs' Life with the supervision, guidance. (Select one) Home subscription and care of young people? (If yes, explain below.) I understand that: APPROVALS FOR UNIT SCOUTERS a. The information that I have provided may be verified, if necessary, by contacting persons We are unaware of anything contrary to the information stated in this application. This application has been reviewed or organizations named in this application, or by contacting any person or organization according to BSA procedures and this applicant meets the leadership qualifications of the Boy Scouts of America: 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. Signature of unit committee chairman Date APPROVAL FOR COUNCIL AND DISTRICT SCOUTERS b. In signing this application, I have read the attached information and apply for We are unaware of anything contrary to the information registration with the Boy Scouts of America. I agree to comply with the Charter and stated in this application. This application has been reviewed Bylaws, and the Rules and Regulations of the Boy Scouts of America and the local council. according to BSA procedures and this applicant meets the I affirm that the information I have given on this form is true and correct. I will follow the Signature of chartered organization head or representative Date leadership qualifications of the Boy Scouts of America: Youth Protection guidelines. Signature of applicant (ACCEPTED) Signature of Scout executive or designee Date Signature of Scout executive or designee Date Registration fee \$ Boys' Life fee \$ **UNIT COPY** Retain on file for three years.

| ADULT APPLICATIO | | | | | | |
|--|--|---|-----------------------------------|------------------------------|----------------------------|---|
| | | SCOUTERS (Fill in the circle.) | | Council/district position | | Scouting background. Position Council Year |
| The information obtained in this form is internal use of the BSA only. | for the Pack Troop | Team Crew Ship Unit | OR | | | |
| | | | | District name | | 2. Experience working with youth in other |
| EXPIRE DATE / / / | TERM | MONTHS New leader Former | leader | | | organizations. |
| If applicant has an unexpired membership ce | rtificate; registration may be accomplis | hed in this unit by paying \$1 for processing the | transfer. Mark and attach certifi | cate. It will be returned by | the council. | 3. Previous residences (for last five years). |
| TRANSFER FROM: COUNCIL NO. | TYPE OF UN | UNIT NO. | | | | City State |
| Please print one letter in each space—press ha | rd; you are making three copies. | | | | | |
| First name (No initials or nicknames) | Middle name | Last name | | | Suffix | 4. Current memberships (religious, community, |
| | | | | | | business, labor, or professional organizations |
| Have you completed: Youth Protection training | Fast Start traini | ing | | | | 5. References. Please list those who are familia |
| Country Mailing address | | City | | State Zi | o code | with your character as it relates to working with youth. References will be checked wher |
| US | | | | | | necessary. |
| Home phone | Business phone | Ext. | Cell phone | | | Name Telephone () |
| | <u> </u> | - X | | | - | Name Telephone () |
| Date of birth (mm/dd/yyyy) | Ethnic background: | Driver's | license No. | | State | Name |
| | Black/African American Native American | Alaska Native Asian | | | | Telephone () |
| Gender Social Security No. (required) | Caucasian/White Hispanic/Latino | Pacific Islander Other | Employer | | | (Mark each answer.) a. Do you use illegal drugs? |
| Gender Social Security No. (required) M F | Occupation | | Employer | | | a. Do you use illegal drugs? b. Have you ever been convicted of a criminal offense? (If yes, explain below.) |
| Country Business address | to the contract of the the contract with the contract of the the | City | | State Zij | code | c. Have you ever been charged with (|
| US | | | | | | child neglect or abuse? d. Has your driver's license ever |
| Position Code Scouting position (description) | | | Are you an Eagle Scout? [| Date earned (mm/dd/yyyy) | | been suspended or revoked? (If yes, explain below.) |
| January (marpha) | | | Yes No | , , | / | e. Other than the above, is there any fact or circumstance involving you |
| 5 7 11 0 11 1 | | | L | | | or your background that would call into question your being entrusted |
| E-mail address Work (Select one) Home | | @ | | | Boys' Life subscription | with the supervision, guidance, and care of young people? (If yes, |
| I understand that: a. The information that I have provided may be verifi | ed if necessary by contacting persons | APPROVALS FOR UNIT SCOUTERS We are unaware of anything contrary to the ir | nformation stated in this applica | tion This application has h | een reviewed | explain below.) |
| or organizations named in this application, or by cor that may have information concerning me, or by cor | tacting any person or organization | according to BSA procedures and this applica | | | | |
| I hereby release and agree to hold harmless from lia that provides information. I also agree to hold harml | bility any person or organization | | | | | |
| council, Boy Scouts of America, and the officers, em b. In signing this application, I have read the attach | ployees, and volunteers thereof. | Signature of unit committee chairman | | Date | APPROVAL FOR COL | UNCIL AND DISTRICT SCOUTERS |
| registration with the Boy Scouts of America. I agree Bylaws, and the Rules and Regulations of the Boy S | e to comply with the Charter and | | | | | anything contrary to the information action. This application has been reviewed |
| I affirm that the information I have given on this for Youth Protection guidelines. | | Signature of chartered organization head or re | epresentative | Date | | rocedures and this applicant meets the tions of the Boy Scouts of America: |
| rototton galdonnoo. | | | • | | | |
| | | | | | | |
| Signature of applicant | Date | (ACCEPTED) Signature of Scout executive or c | lesianee | Date | Signature of Scout | executive or designee Date |



Eraining for Mew Volunteers

(Every Youth in Scouting Deserves a Trained Leader)

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. Welcome to Scouting! As a new Scout volunteer, you are joining our Scouting family, and we want you to understand how the program works.

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

council's Web site. Fast Start training for Cub Scout, Boy Scout, Varsity, and Venturing leaders as well as Youth Protection training programs are available at www.scouting.org/training or through your local

Venturing Leaders. You are expected to complete Youth Protection Guidelines: Training for Volunteer Leaders and Parents or, it you are involved in Venturing, Youth Protection Guidelines: Training for Adult Don't know your council's Web address? Go to www.scouting.org/localcouncillocator for assistance. Additional training opportunities and resources are available through your local council.

What Makes a Trained Leader? (Check when completed)

| Cub Scout leaders are considered trained when they have completed Cub Scout Leader Fast Start training*, Youth Protection training*, Cub Scout Leader Position.) and This is Scouting.* Scoutmasters and assistant Scoutmaster Leader Specific Training, and Introduction to Outdoor Leader Fast Start training*, Youth Protection training*, This is Scouting*, and Introduction to Outdoor Leader Skills. Troop committee members are considered trained when they have completed Boy Scout Leader Fast Start training*, Youth Protection training*, This is Scouting*, and the Troop Committee Challenge* as their leader-specific training. Varsity Scout Leader Specific Training, and Introduction to Outdoor Leader Skills. Varsity Scout Leader Specific Training, and Introduction to Outdoor Leader Skills. Varsity Scout Leader Specific Training, and Introduction to Outdoor Leader Skills. | i rutnəV [] | ig crew Advisors, assistant Advisors, and crew committee members are considered trained when they have completed Venturing Advisor Fast Start training*, otection training*, This is Scouting*, and Venturing Leader Specific Training (and Introduction to Outdoor Leader Skills for outdoor crews only). |
|---|----------------------|---|
| (for their position), and This is Scouting.* Scoutmasters and assistant Scoutmasters are considered training, and Introduction to Outdoor Leader Fast Start training*, Youth Protection training*, This is Scouting*, and the Troop committee members are considered trained when they have completed Boy Scout Leader Start training*, Youth Protection training*, This is Scouting*, and the Troop committee members are considered trained when they have completed Boy Scout Leader Fast Start training*, Youth Protection training*, This is Scouting*, and the | Varsity Varsity | icout leaders and assistants are considered trained when they have completed Varsity Scout Leader Fast Start training*, Youth Protection training*, This is Scouting*, cout Leader Specific Training, and Introduction to Outdoor Leader Skills. |
| (for their position), and This is Scouting.* | o qoorT [] OqoorT | sommittee members are considered trained when they have completed Boy Scout Leader Fast Start training*, Youth Protection training*, This is Scouting*, and the committee Challenge* as their leader-specific training. |
| Cub Scout leaders are considered trained when they have completed Cub Scout Leader Fast Start training*, Youth Protection training*, Cub Scout Leader Position-Specific Training* (for their position), and This is Scouting.* | Scoutm | isters and assistant Scoutmasters are considered training, and Introduction to Outdoor Leader Skills. Scout Leader Start training*, Youth Protection training, and Introduction to Outdoor Leader Skills. |
| | for thei | position), and This is Scouting.* |

What Is Youth Protection Training?

• 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 personal safety awareness for youth as well as adults. Age-appropriate programs and DVD materials include: 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

- Youth Protection Guidelines: Training for Adult Venturing Leaders—Designed to give guidance to the leaders in our teenage coed Venturing program. Supervision and relationship respond and report should a situation arise.
- 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 issues have a different focus regarding personal safety with this age group.
- body, and tell.
- 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. • 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.



adult volunteers and leaders from false accusations of abuse. protection of our youth members; however, they also serve to protect our The Boy Scouts of America has adopted these policies primarily for the

Two-deep leadership—No one-on-one contact—Respecting privacy—Reporting problems

ScoutParents (www.scouting.org/scoutparents)

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

6. Help in at least one support role during the year. 3. Be part of their unit's program—both weekly meetings and outings. 5. Coach them on their advancement and earning of recognition awards. 1. Participate with them.

2. Go to and observe their meetings. 4. Support the program financially.

*Available online at www.scouting.org/training