

BOY SCOUTS OF AMERICA

ADULT APPLICATION

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

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

UNIT SCOUTERS

Check one

Pack No. _____

Troop No. _____

Team No. _____

Post No. _____

Ship No. _____

COUNCIL/DISTRICT/DIVISION SCOUTERS

Council/District/Division position

District name

OR

First name and initial _____ Last name _____ Social Security number (optional) _____

Address—street or R.F.D. _____ Additional address information (if necessary) _____

City _____ State _____ ZIP code _____

Home phone _____ Business phone _____ Date of birth _____ Training (see cover) _____ Position Code (see cover) _____

Month _____ Day _____ Year _____

Occupation, employer, and business address _____

Years at this employment _____ Boys' Life _____ New leader _____ Transfer _____ Former leader _____ Sex _____ U. S. citizen _____ Are you an Eagle Scout? _____

Driver's license No. _____ State _____ Expiration _____

1. Scouting background

Position	Council	Year
_____	_____	_____
_____	_____	_____

2. Experience working with youth in other organizations?

3. Previous residences (for last 5 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 will be checked when necessary.

Name _____

Name _____

Name _____

6. Additional information.

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

I understand that:

- 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. 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 affirm that the information I have given is true and correct.

X _____
Signature of applicant date

APPROVALS FOR UNIT SCOUTERS

We are unaware of any information contrary to the information stated on this application. This applicant meets the leadership standards of the Boy Scouts of America:

Signature of unit committee chairman _____

Date _____

Signature of chartered organization head or chartered organization representative _____

Date _____

Signature of Scout executive or designee _____

Date _____

APPROVAL FOR COUNCIL, DISTRICT, AND DIVISION SCOUTERS

We are unaware of any information contrary to the information stated on this application. This applicant meets the leadership standards of the Boy Scouts of America:

Signature of Scout executive or designee _____

Date _____

Registration fee \$ _____

Boys' Life fee \$ _____

Term (months) _____

Unit renewal date _____
Month Year

If applicant has an unexpired membership certificate, registration may be accomplished by paying \$1 for processing the transfer. Check the box and attach certificate. It will be returned by the council.

FOR COUNCIL USE

Transfer from: _____

Council _____ Nat'l unit No. _____ Member ID No. _____

Occupation code _____ Employer code _____