The applicant has personally appeared before me and demonstrated to my satisfaction that he has met all requirements for the (please print):

Merit Badge	
Name of Counselor	
Address of Counselor	
City	ZIP Coo
Telephone number of Counselor	
,	, ,
Signature of counselor	Date

Checked and recorded: Date Initials

Certificate and badge presented:	
	Date

Applicant will turn in this portion to his unit leader for record posting.

The applicant has personally appeared before me and demonstrated to my satisfaction that he has met all requirements for the (please print):

Merit Badge	
Name of Counselor	
Address of Counselor	
City	ZIP Code
Telephone number of Counselor	
/	/
Signature of counselor	Date
Checked and recorded:	
Data	Initiale

Applicant will turn in this portion to his unit leader for record posting.

Date

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 Name of Counselor

 Address of Counselor

 City
 ZIP Code

 Telephone number of Counselor

 /___/

 Signature of counselor

 Checked and recorded:

 Date

Certificate and badge presented: _	
<u> </u>	Date

Applicant will turn in this portion to his unit leader for record posting.

APPLICANT'S RECORD

Name __

has given me his completed application for the

Merit Badge

Completed on _____/____ by

Signature of Counselor

Signature of unit leader

NOTE TO BOY SCOUT, VARSITY SCOUT, OR EXPLORER: Retain this copy for your permanent records.

APPLICANT'S	RECORD
-------------	--------

Merit Badge

by

by



NOTE TO BOY SCOUT, VARSITY SCOUT, OR EXPLORER: Retain this copy for your permanent records.

APPLICANT'S RECORD

Name ____

has given me his completed application for the

Merit Badge

Completed on _____/___/____/

Signature of Counselor

Signature of unit leader

NOTE TO BOY SCOUT, VARSITY SCOUT, OR EXPLORER: Retain this copy for your permanent COUNSELOR'S RECORD

🖵 Team	Unit number:
Post	
	Merit Badge
Date Comple	eted///
Remarks:	
for at least	ted that the counselor keep this rec 1 year in case any question is raised
later in rega	ard to this award.
COUNSELO	R'S RECORD
Applicant	
🖵 Тгоор	
	Unit number:
Post	
	Merit Badge
	Mont Budgo
Date Comple	eted////
Remarks:	
	ted that the counselor keep this rec 1 year in case any question is raised
later in rega	ard to this award.
COUNSELO	DR'S RECORD
Applicant	
	Unit number:
Post	
	Merit Badge
	eted///////
Date Comple	
Date Comple Remarks:	
-	

It is suggested that the counselor keep this record for at least 1 year in case any question is raised later in recard to this award.

Information for Applicant

- A merit badge application can be approved only by a registered merit badge counselor.
- You must have a buddy with you (Scout buddy system) at each meeting with the merit badge counselor.
- Turn in your approved application to your unit leader. You will be awarded the merit badge emblem and certificate at a suitable occasion.

Information for Counselor

- Merit badge applications must be signed in advance by the applicant's unit leader.
- The Scout must have his buddy (Scout buddy system) in attendance at all instructional sessions.
- You may not change any requirement, but you may share your knowledge or experience that will make the counseling more interesting and valuable.

7 30176 34124 8

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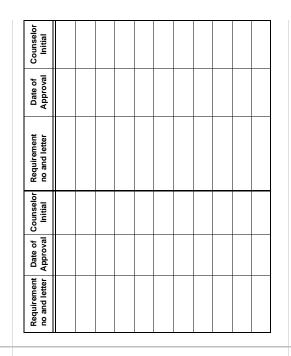
7 30176 34124 8

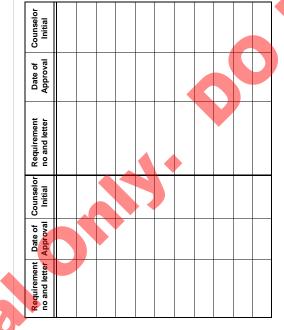
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Counselo Initial						
Date of Approval						
Requirement no and letter						
Date of Counselor Approval Initial						
Requirement no and letter						

П

APPLICATION FOR MERIT BADGE

Name		
Address		
City		
is a registered		
Boy Scout	Varsity Scout	Explorer
of		No.
Troop, te	am, post, ship	
District		
Council		
	fied to begin working d on the reverse side.	
Date	Signature	of Unit Leader
во	Y SCOUTS OF AME	RICA
No. 34124		1996 Printing

APPLICATION FOR MERIT BADGE

Name		
Address		
City		
is a register	ed	
	t Darsity Scout	•
of		No.
Troo	p, team, post, ship	
District		
Council		
	qualified to begin working noted on the reverse side	
Date	Signature	of Unit Leader
	BOY SCOUTS OF AME	RICA
No. 34124		1996 Printing

APPLICATION FOR MERIT BADGE

Name		
City		
is a registered		
,	Varsity Scout	
Troop, te	eam, post, ship	110
District		
Council		
	ified to begin working d on the reverse side.	
Date	Signature	of Unit Leader
ВС	OY SCOUTS OF AME	RICA
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