

# MERIT BADGE COUNSELOR APPLICATION

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

District: \_\_\_\_\_ Unit #: \_\_\_\_\_  
 Name: \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_ (\_\_\_\_) \_\_\_\_\_ (Business) \_\_\_\_\_  
 (Please Print) (Home)  
 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 \_\_\_\_\_