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 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. As a volunteer, you are expected to complete the training within 90 days of assuming a leadership position.

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



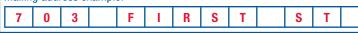
Purpose of the Boy Scouts of America The purpose of the Boy Scouts of America is to promote, through cooperation with other agencies, the ability of youth to do things for themselves and others, and to teach youth patriotism, courage, elf-reliance, and kindred virtues. In achieving this purpose, emphasis is placed upon the Boy Scouts of America's educational program and its oaths, promises, and codes for character development,	the home and organ to religious life. Only	ization or (persons v	group with which t villing to subscribe the Boy Scouts of A	he memb to these America s	er is c precep shall be	hat religious training. Its policy is that onnected shall give definite attention ots from the Declaration of Religious e entitled to certificates of leadership.
itizenship training, and mental and physical fitness.			Leadershi			
Excerpt From Declaration of Religious Principle he Boy Scouts of America maintains that no member can grow into the best kind of citizen without ecognizing an obligation to God and, therefore, recognizes the religious element in the training of the	America deems nec	essary to a e precepts	ford positive lead	ership to	youth.	al qualities that the Boy Scouts of The applicant must also be the correc nciple, and abide by the Scout Oath or
APPROVAL REQUIRED—UNIT SCOUTERS	committee chairmar	n, all other	adult unit personn	el must b	e appr	oved by the head of the chartered
Init committee chairman approves all adult personnel except the chartered organization representa- ve and committee chairman.	organization or the c Scout executive or		-		ters.	
chartered organization head or chartered organization representative. The chartered organization epresentative is approved by the head of the chartered organization. Following approval by the unit	API Scout executive or					NSTRICT SCOUTERS rict Scouters.
couting magazine. This magazine is sent to all registered, paid adult members. bys' Life. Registered adults get a special rate of \$12 a year (half the regular rate of \$24 a year). For a su agazine and up-to-date information on boys and Scouting, just attach the appropriate amount and fill in ease calculate and remit the appropriate state and local taxes. On late registrations it may be necessary	the <i>Boys' Life</i> circle.	Months	FEE CHART Registration	Boys' Life	CR CC MC SM	UNIT POSITION CODE Chartered organization representative Committee chairman Committee member Scoutmaster **
Jalification. Adult citizens, or adult noncitizens who reside within the country, may register with the Bo			1.25		SA	Assistant Scoutmaster**
y 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	2	2.50	2.00	NL NA	Crew Advisor Crew associate Advisor
ates of America, and to subscribe to the precepts of the Declaration of Religious Principle. All leaders m		3	3.75	3.00	SK MT	Skipper Mate
older, except assistant Scoutmasters, assistant den leaders, assistant Cubmasters, assistant Webelos d nt Varsity Scout coaches, who must be 18 or older. No one may register in more than one position in the		4	5.00	4.00	VC	Varsity Scout Coach**
artered organization representative (who can multiple only as the committee chairman (CC) or a commi	and the second	5	6.25	5.00	VA CM	Assistant Varsity Scout Coach** Cubmaster**
d the ScoutParent unit coordinator (who may multiple as chartered organization representative (CR), as		6	7.50	6.00	CA WL	Assistant Cubmaster** Webelos den leader**
sistant Webelos den leader (WA), assistant Scoutmaster (SA), assistant Varsity Scout Coach (VA), mate (MT), and Leader of	7	8.75	7.00	WA	Assistant Webelos den leader**
-year-old Scouts (10)).	Chart torm food are	8	10.00	8.00	DL DA	Den leader ** Assistant den leader**
ubmit my \$15 registration fee for one year, \$2 of which is to cover a subscription to <i>Scouting</i> magazine o rata amounts as indicated.	. Short-term lees are	9	11.25	9.00	TL PT	Tiger Cub den leader Pack trainer
hnic Background Information. The BSA receives inquiries from various agencies regarding racial com	position. Please fill in	10	12.50	10.00	PC	ScoutParent unit coordinator
e appropriate circle on the application to indicate ethnic background.		11	13.75	11.00	10 88	Leader of 11-year old Scouts (LDS Troop) Lone Cub Scout friend and counselor**
SA Privacy Policy. The Boy Scouts of America protects the confidentiality of the names and personal int e affiliated with the movement. No commercial or unauthorized use is made of the names, addresses, a		12	15.00	12.00	96	Lone Scout friend and counselor** Parents (PS) and Tiger Cub adult partners (AP)
formation of members. Access to this information is strictly limited.						lete the bottom portion of the youth applicatio I receive Program Helps as inserts in <i>Scoutin</i>
nis application is designed to be an information-gathering aid. Answers given by the applicant an ose instances where a legitimate question arises as to his/her qualifications.	re to be verified in		Tips for com		he App	blication for Adult Membership:
ISTRUCTIONS			Print—do not use			
hit Scouters Complete and sign the top copy. Keep the back copy (applicant copy) and give the remaining copies to chairman with the proper fees.	o the committee		Use black or dark I Press firmly when			

- The process set forth in the publication Selecting Quality Leaders, No. 18-981, 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.
- ≻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:

>Fill in circles; do not use check marks.



Instructions:

Please read the Authorization and Disclosure Statement 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 Authorization and Disclosure Statement 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.

First name (No initials or nicknames) Please print.	Middle name		Last name		Suffix
]			
Signature of applicant		Date		Unit No.	

My signature below indicates that I have read, understand, and accept the accompanying disclosures and acknowledgments.

ADULT APPLICATION 52	24-501A This form is	s read by machine. Please print the numbers and let	ters as shown: 1 2 3 4 5 6 7 8	9 0 A B C D E F G H I
	UNIT S	SCOUTERS (Fill in the circle.)	Council/district position	1. Scouting background. Position Council Year
The information obtained in this form is for the internal use of the BSA only.	Pack Troop	Team Crew Ship Unit No.	OR	
,		NU.	District name	2. Experience working with youth in other
EXPIRE DATE / /	TERM	MONTHS O New leader O Former leader		organizations.
O If applicant has an unexpired membership certificate; regi	stration may be accomplishe	ed in this unit by paying \$1 for processing the transfer. Mark and at	tach certificate. It will be returned by the council.	3. Previous residences (for last five years).
TRANSFER FROM: COUNCIL NO.	TYPE OF UNI	T UNIT NO.		City State
Please print one letter in each space—press hard; you are n	naking 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: Vouth Protection training	Fast Start trainin	g		5. References. Please list those who are familiar
Country Mailing address		City	State Zip code	with your character as it relates to working with youth. References will be checked when
US				necessary. Name
Home phone	Business phone	Ext.	Cell phone	Telephone ()
	-	- X		Name Telephone ()
Date of birth (mm/dd/yyyy) Ethnic backg	round:	Driver's license No.	State	Name
/ / / African A				Telephone () 6. Additional information. Yes or N
Gender Social Security number (required)	n/White () Hispanic/Latir Occupatior		byer	(Mark each answer.) a. Do you use illegal drugs?
○ M ○ F				 b. Have you ever been convicted of a criminal offense? (If yes, explain below.)
Country Business address		City	State Zip code	c. Have you ever been charged with O O child neglect or abuse?
				-
Position Code Scouting position (description)		Are you an Eagle		d. Has your driver's license ever been suspended or revoked? (If yes, explain below.)
			No / /	e. Other than the above, is there any O O fact or circumstance involving you
E-mail address Work (Select one) Home		@	Boys' Life subscriptio	With the Supervision, guidance,
I understand that: a. The information that I have provided may be verified, if necessa or organizations named in this application, or by contacting any p that may have information concerning me, or by conducting a cri I hereby release and agree to hold harmless from liability any per that provides information. I also agree to hold harmless the chart	erson or organization minal background check. son or organization ered organization, local	APPROVALS FOR UNIT SCOUTERS We are unaware of anything contrary to the information stated in t according to BSA procedures and this applicant meets the leaders		and care of young people? (If yes, explain below.)
council, Boy Scouts of America, and the officers, employees, and b. In signing this application, I have read the attached informatio registration with the Boy Scouts of America. I agree to comply w Bylaws, and the Rules and Regulations of the Boy Scouts of Ame I affirm that the information I have given on this form is true and Youth Protection guidelines.	n and apply for vith the Charter and erica and the local council.	Signature of unit committee chairman Signature of chartered organization head or representative	We are unaware stated in this ap according to BS	COUNCIL AND DISTRICT SCOUTERS e of anything contrary to the information plication. This application has been reviewed A procedures and this applicant meets the fications of the Boy Scouts of America:
Signature of applicant 4001 Registration fee	Date	(ACCEPTED) Signature of Scout executive or designee Boys' Life fee LOC	Date Signature of Sco AL COUNCIL COPY Retain on file for th	but executive or designee Date

ADULT APPLICATION 524-501A						
Г	UNIT SCOUTERS (Fill in the circle	e.)	Cour	ncil/district position	on	1. Scouting background. Position Council Year
The information obtained in this form is for the internal use of the BSA only.	Troop Team Crew	Ship Unit No.	OR			
		NO.	Distr	ict name		2. Experience working with youth in other
EXPIRE DATE / /	TERM MONTHS New lead	ler 🔵 Former leader				organizations.
If applicant has an unexpired membership certificate; registration m	ay be accomplished in this unit by paying \$1 for	processing the transfer. Mark an	d attach certificate. It	will be returned	by the council.	3. Previous residences (for last five years).
TRANSFER FROM: COUNCIL NO.	TYPE OF UNIT	UNIT NO.				City State
Please print one letter in each space—press hard; you are making th	ree copies.					
First name (No initials or nicknames)	Middle name	Last name			Suffix	4 Current memberships (religious, community
						 Current memberships (religious, community, business, labor, or professional organizations).
Have you completed: Youth Protection training	Fast Start training					
Country Mailing address	City			State	Zip code	 References. Please list those who are familiar with your character as it relates to working with youth. References will be checked when
						necessary.
Home phone Busines	s phone	Ext.	Cell phone			Name Telephone ()
	· · · · · · · · · · · · · · · · · · ·	X		-	_	Name
						Telephone () Name
Date of birth (mm/dd/yyyy) Ethnic background:		Driver's license No.			State	Telephone ()
/ / African American Caucasian/White		Asian Other				6. Additional information. Yes or No (Mark each answer.)
Gender Social Security number (required)	Occupation	E	mployer			a. Do you use illegal drugs?
○ M ○ F						b. Have you ever been convicted of O O a criminal offense? (If yes, explain below.)
Country Business address	City			State	Zip code	c. Have you ever been charged with O O child neglect or abuse?
Position Code Scouting position (description)		Are you an Ea	gle Scout? Date ea	rned (mm/dd/yyy	/y)	d. Has your driver's license ever been suspended or revoked?
		◯ Yes	O No	/	1	(If yes, explain below.) e. Other than the above, is there any OO
E-mail address Work						fact or circumstance involving you or your background that would call
(Select one) Home	@				 Boys' Life subscription 	n into question your being entrusted with the supervision, guidance,
I understand that:	APPROVALS FOR UNIT SCOUT	TERS				and care of young people? (If yes, explain below.)
a. The information that I have provided may be verified, if necessary, by con or organizations named in this application, or by contacting any person or or	tacting persons We are unaware of anything or rganization according to BSA procedures	contrary to the information stated and this applicant meets the lea	in this application. The dership qualifications	his application ha of the Boy Scout	as been reviewed is of America:	
that may have information concerning me, or by conducting a criminal back I hereby release and agree to hold harmless from liability any person or org	kground check.					
that provides information. I also agree to hold harmless the chartered orgar council, Boy Scouts of America, and the officers, employees, and volunteers	lization, local	abairman		Data		
b. In signing this application, I have read the attached information and app registration with the Boy Scouts of America. I agree to comply with the Ch	ly for			Date		COUNCIL AND DISTRICT SCOUTERS of anything contrary to the information
Bylaws, and the Rules and Regulations of the Boy Scouts of America and t	he local council.				stated in this app	lication. This application has been reviewed procedures and this applicant meets the
I affirm that the information I have given on this form is true and correct. I Youth Protection guidelines.	NIII TOIIOW the Signature of chartered organi	ization head or representative		Date		ications of the Boy Scouts of America:

Signature of applicant		
	Registration fee	\$

(ACCEPTED) Signature of Scout executive or designee						
Boys' Life fee	\$					

Date

.

CHARTERED ORGANIZATION COPY

Retain on file for three years.

Date

VOORO

Date

Signature of Scout executive or designee

ADULT APPLICATION	524-501A							
	UNIT	SCOUTERS (Fill in the circle.)		Council/	/district position		1. Scouting background. Position Council	Year
The information obtained in this form is for the internal use of the BSA only.	Pack Troop	◯ Team ◯ Crew ◯ Sh	hip Unit No.	OR				
			NO.	District	name		2. Experience working with youth in ot	ther
EXPIRE DATE / /	TERM	MONTHS O New leader	Former leader				organizations.	
O If applicant has an unexpired membership certificate	; registration may be accomplis	ned in this unit by paying \$1 for proce	essing the transfer. Mark and a	attach certificate. It wi	Il be returned by	the council.	3. Previous residences (for last five year	ars)
TRANSFER FROM: COUNCIL NO.	TYPE OF UN	IIT	UNIT NO.					State
Please print one letter in each space—press hard; you	are making three copies.							
First name (No initials or nicknames)	Middle name	La	ast name			Suffix	4. Current memberships (religious, cor	mmunity
							business, labor, or professional orga	
Have you completed: Youth Protection training	Fast Start traini	ng						
Country Mailing address		City			State Zij	o code	 References. Please list those who all with your character as it relates to v with youth. Deferences will be cheel 	working
							with youth. References will be check necessary.	Keu wiieli
Home phone	Business phone		Ext.	Cell phone			Name Telephone ()	
		-	X				Name Telephone ()	
Date of birth (mm/dd/yyyy) Ethnic b	ackground:		Driver's license No.			State	Name	
	can American 🔵 Native Amer	ican 🔵 Alaska Native 🔵 Asian					Telephone ()6. Additional information.	Yes or No
	icasian/White 🔵 Hispanic/Lat	ino 🔵 Pacific Islander 🔵 Other	r 🔄 🗌 🗌				(Mark each answer.)	
Gender Social Security number (required)	Occupatio	n	Emp	loyer			a. Do you use illegal drugs?	0 0 f 0 0
○ M ○ F							 b. Have you ever been convicted of a criminal offense? (If yes, explain below.) 	
Country Business address		City			State Zip	code	c. Have you ever been charged with	h O O
							child neglect or abuse?	
Position Code Scouting position (description)			Are you an Eagle	e Scout? Date earne	d (mm/dd/yyyy)		d. Has your driver's license ever been suspended or revoked?	00
			Yes	No		/	(If yes, explain below.) e. Other than the above, is there any	
							fact or circumstance involving yo or your background that would ca	Du
E-mail address Work (Select one) Home		@				Boys' Life subscription	into question your being entruster with the supervision, guidance,	
I understand that:		APPROVALS FOR UNIT SCOUTERS					and care of young people? (If yes explain below.)	ò,
a. The information that I have provided may be verified, if ne or organizations named in this application, or by contacting	ecessary, by contacting persons		ry to the information stated in	this application. This	application has b	een reviewed	oxplain bolow.)	
that may have information concerning me, or by conducting I hereby release and agree to hold harmless from liability an	a criminal background check.			onip quantoatione of		, anonou.		
that provides information. I also agree to hold harmless the	chartered organization, local							
council, Boy Scouts of America, and the officers, employees b. In signing this application, I have read the attached infor	mation and apply for	Signature of unit committee chairm	nan		Date		JNCIL AND DISTRICT SCOUTERS anything contrary to the information	
registration with the Boy Scouts of America. I agree to com Bylaws, and the Rules and Regulations of the Boy Scouts o	f America and the local council.					stated in this applic	ation. This application has been reviewed	I
I affirm that the information I have given on this form is true Youth Protection guidelines.	e and correct. I will follow the	Signature of chartered organization	n head or representative		Date		rocedures and this applicant meets the tions of the Boy Scouts of America:	_
Signature of applicant	Data	(ACCEDTED) Signature of Cost to a	outive or designed		Data	Signature of Security	executive or designee Date	
Signature of applicant Registration fee	Date	(ACCEPTED) Signature of Scout exe Boys' Life fee \$		UNIT COPY	Date	Retain on file for three	-	

Reg	istratior	ı fee

(ACCEPTED) Signa	ture of	Scol	ut exe	сι	utive	or de	signee
Boys' Life fee	\$						

ADULT APPLICATION 524-501A						
	UNIT SCOUTERS (Fill in the circle.)	Со	ouncil/district position]	1. Scouting background. Position Council	Year
The information obtained in this form is for the internal use of the BSA only.	Troop Team Crew Ship Uni	t OR				
	140.	Dis	strict name		2. Experience working with youth in oth	hor
EXPIRE DATE / / TE	ERM MONTHS New leader Former	leader			organizations.	
O If applicant has an unexpired membership certificate; registration may be	e accomplished in this unit by paying \$1 for processing the	transfer. Mark and attach certificate	. It will be returned by the cour	ncil.	3. Previous residences (for last five yea	ars)
TRANSFER FROM: COUNCIL NO.	TYPE OF UNIT UNIT NO.					State
Please print one letter in each space—press hard; you are making three of	copies.					
First name (No initials or nicknames)	Middle name Last name			Suffix	4 Current membershine (religious con	omunitu
					 Current memberships (religious, com business, labor, or professional organ 	
Have you completed: Youth Protection training	st Start training					<i>c</i>
Country Mailing address	City		State Zip code	:	 References. Please list those who are with your character as it relates to w with youth Deferences will be check 	vorking
					with youth. References will be check necessary.	keu when
Home phone Business ph	none Ext.	Cell phone			Name Telephone ()	
	X				Name Telephone ()	
Date of birth (mm/dd/yyyy) Ethnic background:		license No.			Name	
	Native American Alaska Native Asian				Telephone ()	
	Hispanic/Latino OPacific Islander Other				 Additional information. (Mark each answer.) 	Yes or No
Gender Social Security number (required)	Occupation	Employer			a. Do you use illegal drugs?	00
○ М ○ Р					 b. Have you ever been convicted of a criminal offense? (If yes, explain below.) 	00
Country Business address	City		State Zip code		c. Have you ever been charged with child neglect or abuse?	00
					U U	~ ~
Position Code Scouting position (description)			earned (mm/dd/yyyy)		 d. Has your driver's license ever been suspended or revoked? (If yes, explain below.) 	00
		Yes No	/ /		e. Other than the above, is there any fact or circumstance involving you	
E-mail address Work (Select one) Home	@		Ba su	<i>bys' Life</i> bscription	or your background that would cal into question your being entrusted with the supervision, guidance,	ll
I understand that:	APPROVALS FOR UNIT SCOUTERS				and care of young people? (If yes, explain below.)	1
a. The information that I have provided may be verified, if necessary, by contacti or organizations named in this application, or by contacting any person or organ					onpiani solomiy	
that may have information concerning me, or by conducting a criminal backgrou I hereby release and agree to hold harmless from liability any person or organiza	und check.					
that provides information. I also agree to hold harmless the chartered organizati council, Boy Scouts of America, and the officers, employees, and volunteers there	ion, local		Data			
b. In signing this application, I have read the attached information and apply for registration with the Boy Scouts of America. I agree to comply with the Charter	r				CIL AND DISTRICT SCOUTERS /thing contrary to the information	
Bylaws, and the Rules and Regulations of the Boy Scouts of America and the lo I affirm that the information I have given on this form is true and correct. I will f	ocal council.				on. This application has been reviewed edures and this applicant meets the	
Youth Protection guidelines.	Signature of chartered organization head or r	epresentative	Date leade	ership qualification	ns of the Boy Scouts of America:	
Signature of applicant Da	te (ACCEPTED) Signature of Scout executive or	designee	Date Signa	ature of Scout exe	cutive or designee Date	
Registration fee \$	Boys' Life fee \$	APPLICANT CC	•	on file for three yea	-	

	\$
logistration foo	φ
Registration fee	

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Bovs' Life fee	\$	

Training for New Volunteers



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

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

Fast Start training for Cub Scout, Boy Scout, and Venturing leaders as well as Youth Protection training programs are available through your local council's Web site or service center. Online training is convenient. Your council's Web site may have an icon for training, or you can search for "Training" or "Resources."

Don't know your council's Web address? Go to myscouting.org to view the many training opportunities and courses that are available to you as a new volunteer leader.

You are expected to complete Youth Protection Guidelines: Training for Volunteer Leaders and Parents or, if you are involved in Venturing, Youth Protection Guidelines: Training for Adult Venturing Leaders within the first 90 days of your registration.

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-Specific Training (for their position), and This is Scouting.*
- Scoutmasters and assistant Scoutmasters are considered trained when they have completed Boy Scout Leader Fast Start training*, Youth Protection training*, This is Scouting*, Scoutmaster and Assistant Scoutmaster Leader Specific Training, 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 leaders and assistants are considered trained when they have completed Varsity Scout Leader Fast Start training*, Youth Protection training*, This is Scouting*, Varsity Scout Leader Specific Training, and Introduction to Outdoor Leader Skills.
- Venturing crew Advisors, assistant Advisors, and crew committee members are considered trained when they have completed Venturing Advisor Fast Start training*, Youth Protection training*, This is Scouting*, and Venturing Leader Specific Training.

What Is Youth Protection Training?

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

- 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 respond and report should a situation arise.
- Youth Protection Guidelines: Training for Adult Venturing Leaders—Designed to give guidance to the leaders in our teenage coed Venturing program. Supervision and relationship issues have a different focus regarding personal safety with this age group.
- 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 body, and tell.
- 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.
- Youth Protection: Personal Safety Awareness—Developed for youth ages 14 through 20 in the coeducational Venturing program. It deals with issues pertinent to this age group.

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



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

ScoutParents (www.scouting.org/scoutparents)

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

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

*Available online at myscouting.org

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