

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.

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										Sex										U. S. citizen										Yes No																																							
Driver's license No.										State										Expiration																																								Are you an Eagle Scout?										Yes No																													

**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

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 \$ <input type="text"/> . <input type="text"/>	Boys' Life fee \$ <input type="text"/> . <input type="text"/>	Term (months) <input type="text"/>	Unit renewal date <input type="text"/> / <input type="text"/>
<input type="checkbox"/> 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: <input type="text"/>	<input type="text"/>	<input type="text"/>
Council	Nat'l unit No.	Member ID No.
<input type="text"/>	<input type="text"/>	<input type="text"/>
Occupation code	Employer code	