

BSA ADULT APPLICATION

Please print one letter in each space.

First name (Full legal name)

Middle name

Last name

Suffix

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Preferred nickname:

Country	Home address	City	State	Zip code

Primary phone	Alternate phone	Ext.	Date of birth (mm/dd/yyyy)

Ethnic background:	Driver's license No.	State	Gender
<input type="radio"/> Black/African American <input type="radio"/> Native American <input type="radio"/> Alaska Native <input type="radio"/> Asian <input type="radio"/> Caucasian/White <input type="radio"/> Hispanic/Latino <input type="radio"/> Pacific Islander <input type="radio"/> Other			<input type="radio"/> M <input type="radio"/> F

Social Security No. (required)	Occupation	Employer

Country	Business address	City	State	Zip code

Position code	Scouting position title	Are you an Eagle Scout?	Date earned (mm/dd/yyyy)
		<input type="radio"/> Yes <input type="radio"/> No	

Email address (Select one)	<input type="radio"/> Work 	<input type="radio"/> Home
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I hereby certify that:

- I have read and affirm that I accept the Declaration of Religious Principle. I agree to comply with the rules and regulations of the BSA and the local council, including the Scouter Code of Conduct. **INITIALS REQUIRED**
- I affirm that the information contained in this application is true and accurate to the best of my knowledge and belief. **INITIALS REQUIRED**

Signature of applicant	Date

YPT completion certificate attached
 Background Check Authorization form attached

To be completed by unit

Careful review of the information provided on this application is a significant step in Scouting's efforts to protect its youth members and deliver a quality program.

APPROVALS FOR UNIT ADULTS: I have reviewed this application and the responses to any questions answered "Yes," and have made any follow-up inquiries necessary to be satisfied that the applicant possesses the moral, educational, and emotional qualities to be an adult leader in the BSA.

APPROVAL FOR COUNCIL AND DISTRICT ADULTS: I have reviewed this application and have made any follow-up inquiries necessary to be satisfied that the applicant possesses the moral, educational, and emotional qualities to be an adult leader in the BSA.

Signature of chartered organization head or representative	Date

Signature of Scout executive or designee	Date

Unit type:	<input type="radio"/> Pack <input type="radio"/> Troop <input type="radio"/> New leader <input type="radio"/> Position change
	<input type="radio"/> Crew <input type="radio"/> Ship <input type="radio"/> Former leader <input type="radio"/> Participant

If applicant has an unexpired membership certificate, registration may be accomplished at no charge by transferring the registration or multiple registering.

<input type="radio"/> Transfer application <input type="radio"/> Multiple application	Enter membership number from unexpired certificate:
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Unit No.		OR	District name

Council No.:		Unit type:	<input type="radio"/> Pack <input type="radio"/> Troop <input type="radio"/> Crew <input type="radio"/> Ship
			Unit No. or District name:

Registration fee \$ 	Boys' Life fee \$
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PAID:
 Cash
 Check No. _____
 Credit card

*Multiple means not paid in this unit
 **Fill in the unit this person paid to
 ***Can also designate promoted and reactivated in this area

All questions MUST be answered. Write NONE if applicable.

- Scouting background. Position _____ Council _____ Year _____
- Experience working with youth in other organizations. Please provide contact information. _____
- Previous residences (for last 10 years). City _____ State _____
- Current memberships (religious, community, business, labor, or professional organizations). _____
- References. Please list those who are familiar with your character. References may be checked.

Name _____		
Telephone (____) _____		
Name _____		
Telephone (____) _____		
Name _____		
Telephone (____) _____		
- Additional information. (Mark each answer.)

	Yes	No
a. Have you ever been removed from or asked to leave a leadership position in an organization due to allegations regarding your personal conduct or behavior? Explain: _____	<input type="radio"/>	<input type="radio"/>
b. Do you use illegal drugs or abuse alcohol? Explain: _____	<input type="radio"/>	<input type="radio"/>
c. Have you ever been arrested for a criminal offense (other than minor traffic violations)? Explain: _____	<input type="radio"/>	<input type="radio"/>
d. Has your driver's license ever been suspended or revoked? Explain: _____	<input type="radio"/>	<input type="radio"/>
e. Have you ever been investigated for, accused of, or charged with abuse or neglect of a minor child? Explain: _____	<input type="radio"/>	<input type="radio"/>
f. Are you aware of any reason not listed above that may call into question your suitability to supervise, guide, care for, and lead young people? _____	<input type="radio"/>	<input type="radio"/>