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.



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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, self-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, citizenship training, and mental and physical fitness.

Excerpt From Declaration of Religious Principle

The Boy Scouts of America maintains that no member can grow into the best kind of citizen without recognizing an obligation to God and, therefore, recognizes the religious element in the training of the

APPROVAL REQUIRED—UNIT SCOUTERS

Unit committee chairman approves all adult personnel except the chartered organization representative and committee chairman.

Chartered organization head or chartered organization representative. The chartered organization representative is approved by the head of the chartered organization. Following approval by the unit

member, but it is absolutely nonsectarian in its attitude toward that religious training. Its policy is that the home and organization or group with which the member is connected shall give definite attention to religious life. Only persons willing to subscribe to these precepts from the Declaration of Religious Principle and to the Bylaws of the Boy Scouts of America shall be entitled to certificates of leadership.

Leadership Requirements

The applicant must possess the moral, educational, and emotional qualities that the Boy Scouts of America deems necessary to afford positive leadership to youth. The applicant must also be the correct age, subscribe to the precepts of the Declaration of Religious Principle, and abide by the Scout Oath or Promise, and the Scout Law.

committee chairman, all other adult unit personnel must be approved by the head of the chartered organization or the chartered organization representative.

Scout executive or designee must approve all unit Scouters.

APPROVAL REQUIRED—COUNCIL and DISTRICT SCOUTERS

Scout executive or designee must approve all council and district Scouters.

Scouting magazine. This magazine is sent to all registered, paid adult members.

Boys' Life. Registered adults get a special rate of \$12 a year (half the regular rate of \$24 a year). For a subscription to a great magazine and up-to-date information on boys and Scouting, just attach the appropriate amount and fill in the *Boys' Life* circle. Please calculate and remit the appropriate state and local taxes. On late registrations it may be necessary to deliver back issues. **Qualification.** Adult citizens, or adult noncitizens who reside within the country, may register with the Boy Scouts of America in any 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 States of America, and to subscribe to the precepts of the Declaration of Religious Principle. All leaders must be 21 years of age or older, except assistant Scoutmasters, assistant den leaders, assistant Cubmasters, assistant Webelos den leaders, and assistant Varsity Scout coaches, who must be 18 or older. No one may register in more than one position in the same unit, except the chartered organization representative (who can multiple only as the committee chairman (CC) or a committee member (MC)) and the ScoutParent unit coordinator (who may multiple as chartered organization representative (CR), assistant den leader (DA), assistant Webelos den leader (WA), assistant Scoutmaster (SA), assistant Varsity Scout Coach (VA), mate (MT), and Leader of 11-year-old Scouts (10)).

I submit my \$15 registration fee for one year, \$2 of which is to cover a subscription to *Scouting* magazine. Short-term fees are pro rata amounts as indicated.

Ethnic Background Information. The BSA receives inquiries from various agencies regarding racial composition. Please fill in the appropriate circle on the application to indicate ethnic background.

BSA Privacy Policy. The Boy Scouts of America protects the confidentiality of the names and personal information of those who are affiliated with the movement. No commercial or unauthorized use is made of the names, addresses, and other confidential information of members. Access to this information is strictly limited.

This application is designed to be an information-gathering aid. Answers given by the applicant are to be verified in those instances where a legitimate question arises as to his/her qualifications.

INSTRUCTIONS

Unit Scouters

- 1. Complete and sign the top copy. Keep the back copy (applicant copy) and give the remaining copies to the committee chairman with the proper fees.
- After the application has been reviewed and, if necessary, references checked by the unit committee, secure the approvals.
 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.

Months	FEE CHART Registration	Boys' Life	UNIT POSITION CODE CR Chartered organization representative CC Committee chairman MC Committee member
1	1.25	_	SM Scoutmaster ** SA Assistant Scoutmaster **
2	2.50	2.00	NL Crew Advisor NA Crew associate Advisor
3	3.75	3.00	SK Skipper
4	5.00	4.00	MT Mate VC Varsity Scout Coach**
5	6.25	5.00	VA Assistant Varsity Scout Coach** CM Cubmaster**
6	7.50	6.00	CA Assistant Cubmaster** WL Webelos den leader**
7	8.75	7.00	WA Assistant Webelos den leader**
8	10.00	8.00	DL Den leader ** DA Assistant den leader**
9	11.25	9.00	TL Tiger Cub den leader PT Pack trainer
10	12.50	10.00	PC ScoutParent unit coordinator 10 Leader of 11-year old Scouts (LDS Troop)
11	13.75	11.00	88 Lone Cub Scout friend and counselor**
12	15.00	12.00	96 Lone Scout friend and counselor** ScoutParents (PS) and Tiger Cub adult partners (AP) complete the bottom portion of the youth application **Will receive Program Helps as inserts in Scouting.

Tips for completing the Application for Adult Membership: (Use blue or black ink)

- ➤ Print—do not use cursive.
- > Use black or dark blue ink.
- ➤ Press firmly when printing.
- > Print one letter only in each box.
- ➤ Use upper-case letters and stay within the blue boxes for legibility.
- >Fill in circles; do not use check marks.
- ➤ 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:

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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.

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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.

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

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

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ADULT APPLICATION 524-501A	This form	is read by machine. Please	print the numbe	rs and letters as s	shown: 1 2	3 4 5 6 7 8 9	9
Г	UNIT	SCOUTERS (Fill in the circle.)			Council/district pos	sition	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			
EXPIRE DATE / / /	TERM	MONTHS New leader	Former leader		District name		Experience working with youth in other organizations.
If applicant has an unexpired membership certificate; registration ma	ay be accomplish	ed in this unit by paying \$1 for pro	cessing the transfer.	Mark and attach certifi	cate. It will be return	ed by the council.	3. Previous residences (for last five years).
TRANSFER FROM: COUNCIL NO.	TYPE OF UN	П	UNIT NO.				City State
Please print one letter in each space—press hard; you are making thr First name (No initials or nicknames)	ree copies. Middle name		Last name			Suffix	
							Current memberships (religious, community, business, labor, or professional organizations).
Have you completed: Youth Protection training	Fast Start trainir	ng					
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
US							necessary. Name
Home phone Business	s phone		Ext.	Cell phone			Telephone ()
	-	-	X		-	-	Name
Date of birth (mm/dd/yyyy) Ethnic background:			Driver's license I	lo.		State	Name
/ African American Caucasian/White	Native Ameri						Telephone () 6. Additional information. Yes or No
Gender Social Security number (required)	Occupatio		CI	Employer			(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
US							child neglect or abuse?
Position Code Scouting position (description)					Date earned (mm/dd/	уууу)	d. Has your driver's license ever been suspended or revoked? (If yes, explain below.)
			O Y	es No	/	/	e. Other than the above, is there any fact or circumstance involving you
E-mail address Work (Select one) Home		@				Boys' Life subscription	or your background that would call into question your being entrusted with the supervision, guidance,
I understand that:	to ating namena	APPROVALS FOR UNIT SCOUTERS		n atatad in this applica	tion This application	has been reviewed	and care of young people? (If yes, explain below.)
a. The information that I have provided may be verified, if necessary, by cont or organizations named in this application, or by contacting any person or or that may have information concerning me, or by conducting a criminal back	rganization	We are unaware of anything cont according to BSA procedures and					
The reby release and agree to hold harmless from liability any person or orgathat provides information. I also agree to hold harmless the chartered organi	anization						
council, Boy Scouts of America, and the officers, employees, and volunteers b. In signing this application, I have read the attached information and appl	thereof.	Signature of unit committee chair	rman		Date	APPROVAL FOR CO	OUNCIL AND DISTRICT SCOUTERS
registration with the Boy Scouts of America. I agree to comply with the Che Bylaws, and the Rules and Regulations of the Boy Scouts of America and the	arter and					stated in this applic	f anything contrary to the information cation. This application has been reviewed
I affirm that the information I have given on this form is true and correct. I v Youth Protection guidelines.		Signature of chartered organizati	on head or represent	ative	Date		procedures and this applicant meets the ations of the Boy Scouts of America:
Signature of applicant	Date	(ACCEPTED) Signature of Scout e	xecutive or designee		Date	Signature of Scout	executive or designee Date
4001 Registration fee \$.		Boys' Life fee \$		LOCAL COUN		Retain on file for three	· ·

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ADULT APPLICATION	524-501A					
Г	UNIT	SCOUTERS (Fill in the circle.)		Council/district pos	ition	Scouting background. Position Council Year
The information obtained in this form is for the internal use of the BSA only.	Pack Troop	Team Crew SI	nip Unit No.	OR		
			110.	District name		2. Experience working with youth in other
EXPIRE DATE / / /	TERM	MONTHS New leader	Former leader			organizations.
If applicant has an unexpired membership certificate;	registration may be accomplish	ed in this unit by paying \$1 for proce	essing the transfer. Mark and atta	ach certificate. It will be return	ed by the council.	3. Previous residences (for last five years).
TRANSFER FROM: COUNCIL NO.	TYPE OF UNI	Т	UNIT NO.			City State
Please print one letter in each space—press hard; you a	re making three copies.					
First name (No initials or nicknames)	Middle name	La	ist name		Suffix	4. Current memberships (religious, community,
						business, labor, or professional organizations
Have you completed: Youth Protection training	Fast Start training	g				5. References. Please list those who are familia
Country Mailing address		City		State	Zip code	with your character as it relates to working with youth. References will be checked where
US						necessary.
Home phone	Business phone		Ext. C	ell phone		Name
	-	-	Х	-	-	Name Telephone ()
Date of birth (mm/dd/yyyy) Ethnic ba	ckground:		Driver's license No.		State	Name
	an American Native Americ					Telephone () 6. Additional information. Yes or
Gender Social Security number (required)	asian/White Hispanic/Lati Occupation		Emplo	ver		(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 (child neglect or abuse?
Position Code Scouting position (description)			Are you an Eagle S		уууу)	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
E-mail address Work (Select one) Home		@			Boys' Life subscription	or your background that would call into question your being entrusted with the supervision, guidance,
I understand that: a. The information that I have provided may be verified, if nec or organizations named in this application, or by contacting at that may have information concerning me, or by conducting a I hereby release and agree to hold harmless from liability any that provides information. I also agree to hold harmless the cl	ny person or organization a criminal background check. person or organization hartered organization, local	APPROVALS FOR UNIT SCOUTERS We are unaware of anything contra according to BSA procedures and t				and care of young people? (If yes, explain below.)
council, Boy Scouts of America, and the officers, employees, a b. In signing this application, I have read the attached inform registration with the Boy Scouts of America. I agree to comp Bylaws, and the Rules and Regulations of the Boy Scouts of I affirm that the information I have given on this form is true Youth Protection guidelines.	nation and apply for bly with the Charter and America and the local council.	Signature of unit committee chairm		Date Date	We are unaware of a stated in this applica according to BSA pr	INCIL AND DISTRICT SCOUTERS anything contrary to the information ation. This application has been reviewed ocedures and this applicant meets the tions of the Boy Scouts of America:
Signature of applicant Registration fee \$	Date .	(ACCEPTED) Signature of Scout exe		Date D ORGANIZATION COPY	Signature of Scout e	executive or designee Date years.

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ADULT APPLICATION 524-5		COUTERS (Fill in the circle.)			Council/district positi	ion	Scouting background.	V
The information obtained in this form is for the internal use of the BSA only.	Pack Troop	Team Crew S	Ship Unit	OR			Position Council \	Year
internal use of the BSA only.			No.	OIT	District name			
EXPIRE DATE / /	TERM	MONTHS New leader	Former leader				Experience working with youth in other organizations.	•
If applicant has an unexpired membership certificate; registrate	tion may be accomplished	d in this unit by paying \$1 for prod	cessing the transfer. Marl	cand attach certific	ate. It will be returned	l by the council.	Previous residences (for last five years)).
TRANSFER FROM: COUNCIL NO.	TYPE OF UNIT		UNIT NO.				City Sta	
Please print one letter in each space—press hard; you are make	ing three copies.							
First name (No initials or nicknames)	Middle name	l	ast name			Suffix	4. Current memberships (religious, comm	unity
							business, labor, or professional organiz	
Have you completed: Youth Protection training	Fast Start training						5. References. Please list those who are f	familiar
Country Mailing address		City			State	Zip code	with your character as it relates to wor with youth. References will be checked	rking
							necessary. Name	WIICH
Home phone B	usiness phone		Ext.	Cell phone			Telephone ()_	
		-	Х		-	-	Name Telephone ()	
Date of birth (mm/dd/yyyy) Ethnic backgrour	nd:		Driver's license No.			State	Name	
African Amer		an 🔵 Alaska Native 🔵 Asia					Telephone () 6. Additional information.	es or N
Caucasian/W	/hite Hispanic/Latino	Pacific Islander Other	er				(Mark each answer.)	
Gender Social Security number (required)	Occupation			Employer				0 C
○M ○F Zing And							a criminal offense? (If yes, explain below.)	0 0
Country Business address		City			State	Zip code	'	O C
Position Code Scouting position (description)			Are you a	n Eagle Scout? Da	ate earned (mm/dd/yy	уу)	d. Has your driver's license ever been suspended or revoked? (If yes, explain below.)	O C
			Yes	O No	1	/	e. Other than the above, is there any	O C
E-mail address Work						Boys' Life	fact or circumstance involving you or your background that would call	
(Select one) Home		@				subscription	into question your being entrusted with the supervision, guidance,	
I understand that:		APPROVALS FOR UNIT SCOUTERS					and care of young people? (If yes, explain below.)	
 a. The information that I have provided may be verified, if necessary, or organizations named in this application, or by contacting any personal provided may be contacted as a personal provided may be seen as a personal provided may be verified, if necessary, or organizations named in this application, or by contacting any personal provided may be verified. 	on or organization a	We are unaware of anything contr according to BSA procedures and						
that may have information concerning me, or by conducting a crimina 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 council, Boy Scouts of America, and the officers, employees, and volu		Signature of unit committee chair	man		Date	ADDDOVAL FOR CO.	LINOU AND DICTRICT COOLITEDS	
b. In signing this application, I have read the attached information ar registration with the Boy Scouts of America. I agree to comply with	nd apply for the Charter and	organical or anni committee on an			Date	We are unaware of	UNCIL AND DISTRICT SCOUTERS anything contrary to the information	
Bylaws, and the Rules and Regulations of the Boy Scouts of America I affirm that the information I have given on this form is true and corr	rect. I will follow the					according to BSA p	cation. This application has been reviewed rocedures and this applicant meets the	
Youth Protection guidelines.	S	Signature of chartered organization	on head or representative		Date	leadership qualifica	ttions of the Boy Scouts of America:	
Signature of applicant	Date (A	(ACCEPTED) Signature of Scout e	xecutive or designee		Date	Signature of Scout	executive or designee Date	
Registration fee \$		Boys' Life fee \$	1.	UNIT CO		Retain on file for three	•	

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ADULT APPLICATION	524-501A				
	UNIT	SCOUTERS (Fill in the circle.)	Council/district position		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		
		IVU.	District name		2. Experience working with youth in other
EXPIRE DATE / /	TERM	MONTHS New leader Former leader			organizations.
If applicant has an unexpired membership certificate;	registration may be accomplish	ed in this unit by paying \$1 for processing the transfer. Mark and	attach certificate. It will be returned by the	he council.	3. Previous residences (for last five years).
TRANSFER FROM: COUNCIL NO.	TYPE OF UN	IT UNIT NO.			City State
Please print one letter in each space—press hard; you a	re making 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: Youth Protection training	Fast Start trainir	ng			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
					necessary. Name
Home phone	Business phone	Ext.	Cell phone		Telephone ()
	-	- X			Name Telephone ()
Date of birth (mm/dd/yyyy) Ethnic ba	ckground:	Driver's license No.		State	Name
	an American Native Americ				6. Additional information. Yes or N
Gender Social Security number (required)	asian/White Hispanic/Lati Occupatio		ployer		(Mark each answer.) a. Do you use illegal drugs?
OM OF					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 Child neglect or abuse?
Position Code Scouting position (description)		Are you an Eag			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
E-mail address Work (Select one) Home		@	0	Boys' Life subscription	or your background that would call into question your being entrusted with the supervision, guidance,
I understand that: a. The information that I have provided may be verified, if necor organizations named in this application, or by contacting are that may have information concerning me, or by conducting a	ny person or organization a criminal background check.	APPROVALS FOR UNIT SCOUTERS We are unaware of anything contrary to the information stated according to BSA procedures and this applicant meets the lead			and care of young people? (If yes, explain below.)
I hereby release and agree to hold harmless from liability any that provides information. I also agree to hold harmless the ch	nartered organization, local				
council, Boy Scouts of America, and the officers, employees, a b. In signing this application, I have read the attached inform registration with the Boy Scouts of America. I agree to comp Bylaws, and the Rules and Regulations of the Boy Scouts of America.	ation and apply for ly with the Charter and	Signature of unit committee chairman	Date	We are unaware of a	INCIL AND DISTRICT SCOUTERS anything contrary to the information ation. This application has been reviewed
I affirm that the information I have given on this form is true : Youth Protection guidelines.		Signature of chartered organization head or representative	Date	according to BSA pro	ocedures and this applicant meets the tions of the Boy Scouts of America:
Signature of applicant	Date	(ACCEPTED) Signature of Scout executive or designee	Date	Signature of Scout e	executive or designee Date
Registration fee \$		Boys' Life fee \$.		Retain on file for three	years.

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Training for New Volunteers



(Every Boy Deserves a Trained Leader)

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:

- 1. Participate with them.
- 3. Be part of their unit's program—both weekly meetings and outings. 5. Coach them on their advancement and earning of recognition awards.
- 2. Go to and observe their meetings. 4. Support the program financially.

6. Help in at least one support role during the year.

^{*}Available online at myscouting.org