BOY SCOUTS OF AMERICA ADULT APPLICATION

This application is also available in Spanish. Esta solicitud también está disponible en español.

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 Scout 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.

As members of the Boy Scouts of America, high-quality adult leaders are important role models for youth. This application helps the chartered organization to select qualified leaders to serve as volunteers. Thank you for completing this application in full. 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 applicants for membership are required to take this training within 30 days of registering. To take it online, go to www.MyScouting.org and establish an account using the member number you receive when you register. If you take the training online before you obtain a member number, be sure to return to MyScouting and enter your number for training record credit. Your BSA local council also provides training on a regular basis if you cannot take it online.

For more information, refer to the back of this application.



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 unit members 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 members 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)).

Youth Protection. Child abuse is a serious problem in our society, and unfortunately, it can occur anywhere, even in Scouting. Youth safety is of paramount importance to Scouting and is a driving force in everything we do. For that reason, the BSA continues to create barriers to abuse beyond what have previously existed in Scouting. Any suspected abuse of a child should be reported to the local authorities and the Scout executive. Any inappropriate conduct or violations of BSA policies should be immediately reported to the Scout executive.

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 may be verified.

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. 522-981, 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

- 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.

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

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 Disclosure/Authorization Form 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 Disclosure/Authorization Form 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 program, 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 na	ame		Suffix
Signature of applicant		Date		Unit No.	

The Information distillated in this form is for the Parts. Temp Team Orac Subj. Unit Described in the service of ESA ally. DOSE DATE: If applicant has an encycle memberative orifficate relative or more beader or produced in the service original or the produced in the service original orig	ADULT APPLICATION 524-501 This for	rm is read by machine. Please print the numbers and letters as s	shown: 1 2 3 4 5 6 7 8	9
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E-mail address Work (Select one) Home Boys' Life subscription Understand that: a. The information that I have provided may be verified, by contacting persons or organization that may have information concerning me, or by conducting a criminal background check. I hereby release and agree to hold harmless the chartered organization, local council, Boy Scouts of America, and the officers, employees, and volunteers thereof. b. In signing this applicated information and apply for registration with the Boy Scouts of America. I agree to comply with the Charter and Bylaws, and the Rules and Regulations of the Boy Scouts of America. I agree to comply with the Charter and Bylaws, and the Rules and large given on this form is true and correct. I am aware of and agree to follow the BSA's Youth Protection policies and will complete Youth Protection training within 30 days of registering. Signature of applicant Date Date CACCEPTED) Signature of Scout executive or designee Date Signature of Scout executive or designee Date D	Position Code Scouting position (description)	Are you an Eagle Scout? [Date earned (mm/dd/yyyy)	u. nas your unver s license ever
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ADULT APPLICATION	524-501										
Г	UNIT	SCOUTERS (Fill in the circle.)			Cou	ncil/district p	osition			All questions must be answered. 1. Scouting background.	
The information obtained in this form is for the internal use of the BSA only.	Pack Troop	Team Crew	Ship Unit No.		OR						Year
			140.		Dist	rict name					
EXPIRE DATE / / /	TERM	MONTHS New leader	Former leader							Experience working with youth in other	
If applicant has an unexpired membership certificate;	registration may be accomplish	ed in this unit by paying \$1 for pro	cessing the transfe	r. Mark and atta	ıch certificate. I	t will be retur	rned by t	he counci	l.	organizations. Please provide contact info	rmation.
TRANSFER FROM: COUNCIL NO.	TYPE OF UN	т	UNIT NO.							Previous residences (for last five years City	s). ate
Please print one letter in each space—press hard; you a	are making three copies.										
First name (No initials or nicknames)	Middle name	I	_ast name					Sur	ffix	, =====	
										4. Current memberships (religious, comn	
Have you completed: Youth Protection training	Fast Start training	g								business, labor, or professional organia	zations)
Country Mailing address		City				State	Zip	code		5. References. Please list those who are fai	miliar w
US										your character as it relates to working w References may be checked.	ith yout
Home phone	Business phone		Ext.	С	ell phone					Name Telephone ()	
	-	-	X			-	-			Name	
Date of birth (mm/dd/yyyy) Ethnic bad	ckground:		Driver's license	No.					State	Telephone ()Name	
	'African American Native American	Alaska Native Asian								Telephone ()	
	sian/White Hispanic/Latino	Pacific Islander Othe	r	Farata						(Mark each answer)	Yes or 1
Gender Social Security No. (required) M F	Occupatio	<u> </u>		Emplo	/er					a. Do you use illegal drugs? b. Have you ever been convicted of	00
										a criminal offense? (If yes, explain below.)	
Country Business address		City				State	Zip	code		c. Have you ever been charged with,	0 (
										or investigated or arrested for, child neglect or abuse?	~ ~
Position Code Scouting position (description)			Are	you an Eagle S	cout? Date ea	arned (mm/do	d/yyyy)			d. Has your driver's license ever been suspended or revoked?	0 (
				Yes	No	/		,		(If yes, explain below.)	0 (
E mail address Wark										fact or circumstance involving you	
E-mail address Work (Select one) Home		@							s' <i>Life</i> scription	or your background that would call into question your being entrusted	
I understand that: a. The information that I have provided may be verified, by coorganizations named in this application, or by contacting any	person or organization that	APPROVALS FOR UNIT SCOUTERS This application has been reviewed of the BSA.	: We are unaware o according to BSA p	f anything contra rocedures, and t	ary to the inform his applicant me	ation stated ir ets the leader	n this app rship qua	olication. difications	•	with the supervision, guidance, and care of young people? (If answer is yes, explain below.)	
may have information concerning me, or by conducting a crir I hereby release and agree to hold harmless from liability any	person or organization										
that provides information. I also agree to hold harmless the cl council, Boy Scouts of America, and the officers, employees,	and volunteers thereof.	Signature of unit committee chair	man			Date		ADDDOL	/AL FOD CO	LINCH AND DICTRICT COULTERS	
 b. In signing this application, I have read the attached information the Boy Scouts of America. I agree to comply with the Charter an 	nd Bylaws, and the Rules and							We are	unaware of	UNCIL AND DISTRICT SCOUTERS anything contrary to the information stated	
Regulations of the Boy Scouts of America and the local council. I have given on this form is true and correct. I am aware of and agi	ree to follow the BSA's Youth							to BSA p	rocedures,	This application has been reviewed according and this applicant meets the leadership	
Protection policies and will complete Youth Protection training wit	thin 30 days of registering.	Signature of chartered organization	on nead or represe	ntative		Date		quaimca	ations of the	DOA.	1
Signature of applicant											
orginature or approprie	Date	(ACCEPTED) Signature of Scout ex	xecutive or designe	е		Date	е	Signatu	re of Scout	executive or designee Date	

ADULT APPLICATION	524-501									
	UNIT S	SCOUTERS (Fill in the circle.)			Cou	ncil/district po	osition			All questions must be answered. 1. Scouting background.
The information obtained in this form is for the internal use of the BSA only.	Pack Troop	Team Crew	Ship Unit No.		OR					Position Council Year
			110.		Dist	rict name				
EXPIRE DATE / / /	TERM	MONTHS New leader	Former leade	-						Experience working with youth in other
If applicant has an unexpired membership certificate;	registration may be accomplished	ed in this unit by paying \$1 for pro	cessing the transf	er. Mark and att	ach certificate. I	t will be retur	ned by t	he council	l.	organizations. Please provide contact informati
TRANSFER FROM: COUNCIL NO.	TYPE OF UNI	г	UNIT NO.							3. Previous residences (for last five years). City State
Please print one letter in each space—press hard; you a	are making three copies.									
First name (No initials or nicknames)	Middle name		_ast name					Suf	fix	
										4. Current memberships (religious, community
Have you completed: Youth Protection training	Fast Start trainin	g								business, labor, or professional organization
Country Mailing address		City				State	Zip	code		5. References. Please list those who are familiar
US										your character as it relates to working with yo References may be checked.
Home phone	Business phone		Ext.	(Cell phone					Name
		-	X			-	-			Name
Date of birth (mm/dd/yyyy) Ethnic bac	ckground:		Driver's licens	e No.					State	Telephone ()Name
	'African American Native American	Alaska Native Asia								Telephone ()
	sian/White Hispanic/Latino	Pacific Islander Othe	r	Emple	wor					(Mark each answer.)
Gender Social Security No. (required) M F	Occupation			Emplo	lyei					a. Do you use illegal drugs? 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,
										or investigated or arrested for, child neglect or abuse?
Position Code Scouting position (description)			Are	you an Eagle S	Scout? Date ea	arned (mm/do	d/yyyy)			d. Has your driver's license ever been suspended or revoked?
				Yes	No	/		,		(If yes, explain below.)
E mail address Wark										fact or circumstance involving you
E-mail address Work (Select one) Home		@					0		<i>Life</i> cription	or your background that would call into question your being entrusted
I understand that: a. The information that I have provided may be verified, by coorganizations named in this application, or by contacting any	ontacting persons or person or organization that	APPROVALS FOR UNIT SCOUTERS This application has been reviewed of the BSA.							•	with the supervision, guidance, and care of young people? (If answer is yes, explain below.)
may have information concerning me, or by conducting a crir I hereby release and agree to hold harmless from liability any										
that provides information. I also agree to hold harmless the cl council, Boy Scouts of America, and the officers, employees,		Signature of unit committee chair	man			Date		40000	505.00	
b. In signing this application, I have read the attached information the Boy Scouts of America. I agree to comply with the Charter an		organization of unit committee origin				2410		We are	unaware of	UNCIL AND DISTRICT SCOUTERS anything contrary to the information stated
Regulations of the Boy Scouts of America and the local council. I have given on this form is true and correct. I am aware of and agi						_		to BSA p	rocedures,	This application has been reviewed according and this applicant meets the leadership
Protection policies and will complete Youth Protection training wit		Signature of chartered organization	on head or represe	ntative		Date		qualifica	itions of the	e BSA:
Signature of applicant	Date	(ACCEPTED) Signature of Scout e	vecutive or decign	20		Date		Signatu	re of Scout	executive or designee Date
		(ACCLI ILD) Signature of Scout 6	ACCULIVE OF UCSIUM	56		Dale	,	Oigilata	o or occur	oncountry of accignos

ADULT APPLICATION 524-501			
UNIT	SCOUTERS (Fill in the circle.)	Council/district position	All questions must be answered.
The information obtained in this form is for the internal use of the BSA only.	Team Crew Ship Unit No.	OR	Scouting background. Position Council Year
		District name	
EXPIRE DATE / / TERM	MONTHS New leader Former leader		Experience working with youth in other organizations. Please provide contact information.
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 of	ertificate. It will be returned by the council.	
TRANSFER FROM: COUNCIL NO. TYPE OF UN	UNIT NO.		Previous residences (for last five years). City State
Please print one letter in each space—press hard; you are making three copies. First name (No initials or nicknames) Middle name	Last name	Suffix	
Prist name (no initials of inicalianes)	Last Haine	Suilix	
			4. 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	5. References. Please list those who are familiar wit your character as it relates to working with youth
			References may be checked.
Home phone Business phone	Ext. Cell pl	hone	Name
	- X		Name
Date of birth (mm/dd/yyyy) Ethnic background:	Driver's license No.	State	Telephone ()
Black/African American Native American			Telephone ()_
/ / Caucasian/White Hispanic/Latino	Pacific Islander Other		6. Additional information. Yes or N (Mark each answer.)
Gender Social Security No. (required) Occupation	on Employer		a Da you use illegal drugs?
OM OF			b. Have you ever been convicted of a criminal offense? (If yes,
Country Business address	City	State Zip code	explain below.) c. Have you ever been charged with, O
			or investigated or arrested for,
Position Code Scouting position (description)	Are you an Eagle Scout'	? Date earned (mm/dd/yyyy)	d. Has your driver's license ever been suspended or revoked?
	○ Yes ○ No	/ / /	(If yes, explain below.)
E well address O World			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, and
I understand that:	APPROVALS FOR UNIT SCOUTERS: We are unaware of anything contrary to		care of young people? (If answer is yes, explain below.)
a. The information that I have provided may be verified, by contacting persons or organizations named in this application, or by contacting any person or organization that	This application has been reviewed according to BSA procedures, and this a of the BSA.	pplicant meets the leadership qualifications	yes, explain below.)
may have information concerning me, or by conducting a criminal background check. 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.	Cinnature of unit committee abairman	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 and Bylaws, and the Rules and	Signature of unit committee chairman		OUNCIL AND DISTRICT SCOUTERS f anything contrary to the information stated
Regulations of the Boy Scouts of America and the local council. I affirm that the information I		in this application	This application has been reviewed according and this applicant meets the leadership
have given on this form is true and correct. I am aware of and agree to follow the BSA's Youth Protection policies and will complete Youth Protection training within 30 days of registering.	Signature of chartered organization head or representative	Date qualifications of the	
Signature of applicant Date	(ACCEPTED) Signature of Scout executive or designee	•	t executive or designee Date
Registration fee \$	Boys' Life fee \$	CANT COPY Retain on file for thr	ee years.

Training for New Volunteers

(Every Youth in Scouting 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, Varsity, and Venturing leaders as well as Youth Protection training programs are available at www.scouting.org/training or through your local council's website. Don't know your council's web address? Go to www.scouting.org/localcouncillocator for assistance. Additional training opportunities and resources are available through your local council. All applicants for membership are required to complete Youth Protection training within 30 days of registering.

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

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 (and Introduction to Outdoor Leader Skills for outdoor crews only)

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 training must be taken every two years.
- 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. Youth Protection training must be taken every two years.
- 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 13 through 20 in the coeducational Venturing program. It deals with issues pertinent to this age group.

Youth Protection training is available online at www.MyScouting.org. You can establish an account there using the member number you receive when you register. If you take the online training before you receive a member number, be sure to return to MyScouting and enter your number for training record credit.



The Boy Scouts of America has Youth Protection policies to protect youth, and these same policies help protect adult volunteers.

These and other key policies are addressed in the training:

Two-deep leadership—There must always be at least two adults on all trips and outings.

No One-on-One Contact—One-on-one contact between adults and youth members is not permitted.

Respecting Privacy—Adult leaders must respect the privacy of youth members and their own privacy in situations such as changing clothes or using restroom and shower facilities.

Separate accommodations—No youth is permitted in the tent or room of an adult other than their own parent or guardian.

Reporting problems—All violations of the law and BSA policies are to be reported as directed in the BSA's *Guide to Safe Scouting* and other BSA policy materials.

Adults must follow the policies and insist others always follow them.

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.
- 2. Go to and observe their meetings.

position), and This Is Scouting.*

3. Be part of their unit's program—both weekly meetings and outings.

To learn more, go to www.scouting.org/scoutparents.

*Available online at www.scouting.org/training.

- 4. Support the program financially.
- 5. Coach them on their advancement and earning of recognition awards.
- 6. Help in at least one support role during the year.
- 7. Take Youth Protection training (available online).

