



MERIT BADGE COUNSELOR APPLICATION AND RENEWAL FORM

Merit Badge Counselors are required to register annually. Please complete both sides of this form, sign and return it to the GCC.

***If you are registering as a MB counselor for the first time, you also need to fill out an additional BSA application.**

Please ensure that you fill out the back side of this application with the merit badges you wish to counsel this year along with your credentials.

(Check all that apply)

*New Counselor _____ *(I have attached an Adult Scout Application as required by the BSA)

Annual Renewal _____ Please check all merit badges you wish to counsel and give credentials on back.

Name _____ Home Phone (____) _____

Address _____ E-Mail _____

City _____ State _____ Zip code _____

I am currently registered with the BSA as (position): _____

To qualify as a merit badge counselor, you must:

- *Be at least 18 years old.
- *Be proficient in the merit badge subject by vocation, avocation or special training.
- *Be able to work with Scout-age boys.
- *Be registered with the BSA as a merit badge counselor
- *Complete BSA Youth Protection Training

As a merit badge counselor, I agree to:

- *Follow the requirements on the merit badge, making no deletions or additions, ensuring that the advancement standards are fair and uniform for all scouts.
- *Have a Scout and his buddy present at all instructional sessions.
- *Renew my registration annually if I plan to continue as a merit badge counselor.

I agree to complete BSA Youth Protection Training prior to working with any Scout. Once completed, I will inform the Greater Cleveland Council. Training available at <http://olc.scouting.org>

I have already completed Youth Protection Training on: Date _____

_____ I wish to work with all units _____ OK to list my information on the council web site.

_____ I only wish to work with one unit _____ Please list the unit where you wish serve _____
(note: if working with one unit only, your information will not be posted on council web site)

Please indicate which district you will be registering with by circling your District Code.

*****Return MB application to*****

- CC - Crooked Creek GR - Glacier Ridge
- CV - Cuyahoga Valley PR - Pioneer
- DR - Dover Rockport QL - Quarrylands
- FT - Freedom Trail TR - Two Rivers

Greater Cleveland Council
 Boy Scouts of America
 2241 Woodland Avenue
 Cleveland, Ohio 44115

For Advancement Committee Approval	
<input type="checkbox"/> Yes	<input type="checkbox"/> No Date _____
Signature _____	
(After approval by advancement committee, please forward to Scout office for council registration.)	

FOR COUNCIL USE ONLY	
MB Counselor registered Scouter, Adult application on file.	
<input type="checkbox"/> Yes <input type="checkbox"/> No	
Registrar Initials and date: _____	
(After MB counselor data entered, please return form to appropriate district advancement chair for their records.)	

