Information for Applicant

- A merit badge application can be approved only by a registered merit badge counselor.
- You must have a buddy with you (Scout buddy system) at each meeting with the merit badge counselor.
- Turn in your approved application to your unit leader. You will be awarded the merit badge emblem and certificate at a suitable occasion.

Information for Counselor

- Merit badge applications must be signed in advance by the applicant's unit leader.
- The Scout must have his buddy (Scout buddy system) in attendance at all instructional sessions.
- You may not change any requirement, but you may share your knowledge or experience that will make the counseling more interesting and valuable.

Counselor initial						
Date of approval						
Requirement No. and letter						
Counselor initial						
Date of approval						
Requirement No. and letter						

APPLICATION FOR MERIT BADGE

Name
Address
City
is a registered □ Boy Scout □ Varsity Scout □ Venturer
ofNoNo
District
Council
and is qualified to begin working for the merit badge noted on the reverse side.
Date Signature of unit leader
BOY SCOUTS OF AMERICA®

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Requirement No. and letter	Date of approval	Counselor initial	Requirement No. and letter	Date of approval	Counselor initial

APPLICATION FOR MERIT BADGE

Name

Address					
City					
is a registered					
☐ Boy Scout ☐ Varsity Scout ☐ Venturer					
ofNo					
(Troop, team, crew, ship)					
District					
Council					
and is qualified to begin working for the merit badge noted on the reverse side.					
Date Signature of unit leader					

BOYSCOUTS

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Counselor Requirement initial No. and letter
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Name
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☐ Boy Scout ☐ Varsity Scout ☐ Venturer
ofNoNo.
(Troop, team, crew, ship)
District
Council
and is qualified to begin working for the merit badge noted on the reverse side.
Date Circulus of wild lands



The applicant has personally appeared before me and demonstrated to my satisfaction that he has met	APPLICANT'S RECORD	COUNSELOR'S RECORD
all requirements for the (please print)		
	Name	Applicant
Merit badge	has given me his completed application for the	☐ Troop
Name of counselor		☐ Team Unit number
Table of council.	Merit badge	□ Crew
Address of counselor	Completed on / / by	
City Zip Code	Completed on / / by Date	
Zip Code		Merit badge
Telephone number of counselor	Signature of counselor	Date completed / /
S		
Signature of counselor Date	Signature of unit leader	Remarks:
Checked and recorded:		
Date Initials		
Date certificate and badge presented:		
Applicant will turn in this portion to his unit leader	NOTE TO BOY SCOUT, VARSITY SCOUT, OR	It is suggested that the counselor keep this record
for record posting.	VENTURER: Retain this copy for your permanent records.	for at least 1 year in case any question is raised later in regard to this award.
	1000100	into in regula to this arrange
The applicant has personally appeared before me	APPLICANT'S RECORD	COUNSELOR'S RECORD
and demonstrated to my satisfaction that he has met all requirements for the (please print)		
and a factor of the same from		A 10 .
Merit badge	Name	Applicant
	has given me his completed application for the	□ Troop
Name of counselor		☐ Team Unit number
Address of counselor	Merit badge	☐ Crew
Address of courtools	We'll bauge	
City Zip Code	Completed on / / by	
Talankana ayankan af ayyanlar	Completed on / / by Date	Merit badge
Telephone number of counselor		
Signature of counselor Date	Signature of counselor	Date completed / /
	Signature of couriseior	Remarks:
Checked and recorded:		
Date	Signature of unit leader	
Date Initials		
Date certificate and badge presented:		
Applicant will turn in this portion to his unit leader	NOTE TO BOY SCOUT, VARSITY SCOUT, OR	It is suggested that the counselor keep this record
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The applicant has personally appeared before me	APPLICANT'S RECORD	COUNSELOR'S RECORD
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all requirements for the (please print)	Name	Applicant
Merit badge	has given me his completed application for the	□ Troop
	nao givon mo mo completes application to the	☐ Team Unit number
Name of counselor	Merit badge	□ Crew
	We'll badge	
Address of counselor	Completed on / / by Date	
City Zip Code	24.0	
	Signature of counselor	Merit badge
Telephone number of counselor	Gignata o or councolo.	Date completed / /
Signature of counselor Date	Signature of unit leader	Remarks:
<u> </u>		
Checked and recorded:		
Date Initials		
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