## 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.

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|---|---|---|---|---|---|---|---|---|---|---|---|
| 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

of _____ No. _____
Troop, team, crew, ship

District _____

Council _____

and is qualified to begin working for merit badge noted on the reverse side.

_____ _____
Date Signature of unit leader

BOY SCOUTS OF AMERICA®

34124A
2003 Boy Scouts of America

The applicant has personally appeared before me and demonstrated to my satisfaction that he has met all requirements for the (please print)

_____
Merit badge

_____
Name of counselor

_____
Address of counselor

_____
City Zip code

_____
Telephone number of counselor

_____ / /
Signature of counselor Date

Checked and recorded:

_____
Date Initials

Certificate and badge presented _____
Date

**Applicant will turn in this portion to his unit leader for record posting.**

## APPLICANT'S RECORD

Name _____

has given me his completed application for the

_____
Merit badge

Completed on ___/___/___ by
Date

_____
Signature of counselor

_____
Signature of unit leader

**NOTE TO BOY SCOUT, VARSITY SCOUT, OR VENTURER: Retain this copy for your permanent records.**

## COUNSELOR'S RECORD

Applicant _____

☐ Troop

☐ Team Unit number _____

☐ Crew

_____
Merit badge

Date completed ___/___/___

Remarks:

**It is suggested that the counselor keep this record for at least 1 year in case any question is raised later in regard to this award.**