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.



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, and 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.** Adults who are not citizens of the United States but 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 the 11-year-old Scouts).

I submit my \$10 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

- 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.
- 2. 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 | CR CC MC | UNIT POSITION CODE Chartered organization representative Committee chairman Committee member |
|--------|---------------------------|---------------|----------------|----------------------------------------------------------------------------------------------|
| 1 | .85 | _ | SM SA | Scoutmaster ** Assistant Scoutmaster** |
| 2 | 1.70 | 2.00 | NL | Crew Advisor |
| 3 | 2.55 | 3.00 | NA SK | Crew associate Advisor Skipper |
| 4 | 3.40 | 4.00 | MT VC | Mate Varsity Scout Coach** |
| 5 | 4.25 | 5.00 | VA | Assistant Varsity Scout Coach** |
| 6 | 5.10 | 6.00 | CM CA | Cubmaster** Assistant Cubmaster** |
| 7 | 5.95 | 7.00 | WL WA | Webelos den leader** Assistant Webelos den leader** |
| 8 | 6.80 | 8.00 | DL DA | Den leader ** Assistant den leader** |
| 9 | 7.65 | 9.00 | TL | Tiger Cub den leader |
| 10 | 8.50 | 10.00 | PT PC | Pack trainer ScoutParent unit coordinator |
| 11 | 9.35 | 11.00 | 42 88 | Merit badge counselor Lone Cub Scout friend and counselor** |
| 12 | 10.00 | 12.00 | 96 | Lone Scout friend and counselor** receive Program Helps as inserts in <i>Scouting</i> . |

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 and review the authorization and disclosure statement. Then sign and date at the bottom of this sheet. To complete your Boy Scouts of America Adult Application, this form and the signed application must be turned in together.

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 ChoicePoint, a consumer reporting agency, to provide the consumer reports. ChoicePoint may be contacted by mail at ChoicePoint, 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 ChoicePoint 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 ChoicePoint 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 ChoicePoint 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. ChoicePoint.

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 Choice-Point, 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 ChoicePoint's 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. ChoicePoint 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 request, 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 |
|-----------------------------------------------------|-------------|-----------|---|--------|
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| | | | | |
| Signature of applicant | | Date | | |

| ADULT APPLICATION 28-501F TI | his form is read by machine. Please print the nu | mbers and letters as shown: 1 2 | 3 4 5 6 7 8 9 0 A B C D E F G H I |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------|-------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------|
| Г | UNIT SCOUTERS (Fill in the circle.) | Council/district pos | ition 1. 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 | OR | |
| EXPIRE DATE / / TEF | | District name | Experience working with youth in other organizations. |
| If applicant has an unexpired membership certificate; registration may be | accomplished in this unit by paying \$1 for processing the trar | sfer. Mark and attach certificate. It will be returne | ed by the council. |
| TRANSFER FROM: COUNCIL NO. | TYPE OF UNIT UNIT NO. | | 3. Previous residences (for last five years). City State |
| Please print one letter in each space—press hard; you are making three co | • | | |
| First name (No initials or nicknames) Mi | liddle name Last name | | Suffix 4. Current memberships (religious, community, |
| | | | business, labor, or professional organizations). |
| Have you completed: Youth Protection training Fast | Start training | | 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 pho | one Ext. | Cell phone | Telephone () |
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| Date of birth (mm/dd/yyyy) Ethnic background: | Driver's lice | nse No. | State Name |
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| Gender Social Security number (required) | Occupation | Employer | a. Do you use illegal drugs? |
| ○ M ○ F | | | b. Have you ever been convicted of a criminal offense? (If yes, |
| Country Business address | City | State | explain below.) Zip code c. Have you ever been charged with |
| US | | | child neglect or abuse? |
| Position Code Scouting position (description) | | Are you an Eagle Scout? Date earned (mm/dd/y | d. Has your driver's license ever been suspended or revoked? |
| | | Yes No / | (If yes, explain below.) e. Other than the above, is there any |
| E-mail address Work | @ | | fact or circumstance involving you or your background that would call into question your being entrusted |
| (Select one) Home | | | subscription with the supervision, guidance, and care of young people? (If yes, |
| I understand that: a. The information that I have provided may be verified, if necessary, by contacting | APPROVALS FOR UNIT SCOUTERS ng persons We are unaware of anything contrary to the inform | mation stated in this application. This application | explain below.) |
| or organizations named in this application, or by contacting any person or organiz that may have information concerning me, or by conducting a criminal backgroun | zation according to BSA procedures and this applicant r | | |
| 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 | tion | | |
| council, Boy Scouts of America, and the officers, employees, and volunteers there b. In signing this application, I have read the attached information and apply for | olgitatare of affic committee chairman | Date | APPROVAL FOR COUNCIL AND DISTRICT SCOUTERS |
| registration with the Boy Scouts of America. I agree to comply with the Charter a Bylaws, and the Rules and Regulations of the Boy Scouts of America and the loca | cal council. | | We are unaware of anything contrary to the information stated in this application. This application has been reviewed |
| I affirm that the information I have given on this form is true and correct. I will follow Protection guidelines. | ollow the Signature of chartered organization head or repre | esentative Date | according to BSA procedures and this applicant meets the leadership qualifications of the Boy Scouts of America: |
| - | | | |
| Signature of applicant Date | e (ACCEPTED) Signature of Scout executive or design | gnee Date | Signature of Scout executive or designee Date |
| 4001 Registration fee \$. | Boys' Life fee \$. | LOCAL COUNCIL COPY | Retain on file for three years. |

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| Scouting position (description) Are you an Eagle Scout? Yes No / / / / | UIS | | | child neglect or abuse? |
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| Select one) Home understand that: a. The information that I have provided may be verified, if necessary, by contacting persons or organizations named in this application, or by contacting any person or organization hat may have information concerning me, or by conducting a criminal background check. hereby release and agree to hold harmless from liability any person or organization, laso agree to hold harmless from liability any person or organization, local council, Boy Scouts of America, and the officers, employees, and volunteers thereof. b. In signing this application, thave read the attached information and apply for egistration with the Boy Scouts of America. I agree to comply with the Charter and saffirm that the information I have given on this form is true and correct. I will follow the fourth Protection guidelines. APPROVAL FOR COUNCIL AND DISTRICT SCOUTERS We are unaware of anything contrary to the information of the Boy Scouts of America. Signature of unit committee chairman Date APPROVAL FOR COUNCIL AND DISTRICT SCOUTERS We are unaware of anything contrary to the information of the Boy Scouts of America: Signature of unit committee chairman Date APPROVAL FOR COUNCIL AND DISTRICT SCOUTERS We are unaware of anything contrary to the information of | | | | fact or circumstance involving you |
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| | Signature of applicant | (ACCEPTED) Signature of Scout executive or designed | Date Signature of Scout eve | ecutive or designee Date |
| | Registration fee \$ | , , , , , , , , , , , , , , , , , , , | | Ç |

| ADULT APPLICATION 28-501F | | | | | |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------|---------------------------------------|------------------------------------------------|--------------------------------------|------------------------------------------------------------------------------------------|
| UNIT | SCOUTERS (Fill in the circle.) | | Council/district posit | tion | Scouting background. Position Council Year |
| The information obtained in this form is for the internal use of the BSA only. | Team Crew Ship Unit | OR | | |] |
| | INU. | | District name | | 2. Experience working with youth in other |
| EXPIRE DATE / / TERM | MONTHS New leader Former I | leader | | | organizations. |
| If applicant has an unexpired membership certificate; registration may be accomplis | hed in this unit by paying \$1 for processing the t | ransfer. Mark and attach certifi | cate. It will be returned | d by the council. | 3. Previous residences (for last five years). |
| TRANSFER FROM: COUNCIL NO. TYPE OF U | NIT UNIT NO. | | | | City State |
| Please print one letter in each space—press hard; you are making three copies. | | | | | |
| First name (No initials or nicknames) Middle nam | e Last name | | | Suffix | 4. Current memberships (religious, community, |
| | | | | | business, labor, or professional organizations) |
| Have you completed: Youth Protection training Fast Start train | ing | | | | 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 background: | Driver's ! | license No. | | State | Name |
| African American Native Ame | | | | | Telephone () 6. Additional information. Yes or N |
| Caucasian/White Hispanic/La | tino Pacific Islander Other | | | | (Mark each answer.) |
| Gender Social Security number (required) Occupati | on | Employer | | | 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 Scout? | ate earned (mm/dd/yy | /yy) | d. Has your driver's license ever been suspended or revoked? |
| | | Yes No | 1 | 1 | (If yes, explain below.) e. Other than the above, is there any |
| E-mail address Work | | L | | Parel Life | fact or circumstance involving you or your background that would call |
| (Select one) Home | @ | | | Boys' Life 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, by contacting persons or organizations named in this application, or by contacting any person or organization | We are unaware of anything contrary to the intaccording to BSA procedures and this applicar | formation stated in this applica | tion. This application hations of the Boy Scou | nas been reviewed uts of America: | |
| that 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. b. In signing this application, I have read the attached information and apply for | Signature of unit committee chairman | | Date | | UNCIL AND DISTRICT SCOUTERS |
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| I affirm that the information I have given on this form is true and correct. I will follow the Youth Protection guidelines. | Signature of chartered organization head or re | epresentative | Date | | rocedures and this applicant meets the tions of the Boy Scouts of America: |
| iodal i rotocaon guidelines. | 5 2. 2 2 2 2 2 | r | 24.0 |] | , |
| Signature of applicant Date | (ACCEPTED) Signature of Scout executive or de | esignee | Date | Signature of Scout | executive or designee Date |
| | ` ' ' ' ' ' | 7 | | • | • |
| Registration fee \$ | Boys' Life fee \$ | UNIT CO | JPY | Retain on file for three | e years. |

| UNIT SCOUTERS (Fill in the circle.) The information obtained in this form is for the internal use of the BSA only. EXPIRE DATE If applicant has an unexpired membership certificate; registration may be accomplished in this unit by paying \$1 for processing the transfer. Mark and attach certificate. It will be returned by the council. TRANSFER FROM: COUNCIL NO. TYPE OF UNIT UNIT NO. Please print one letter in each space—press hard; you are making three copies. First name (No initials or nicknames) Middle name Last name Country Mailing address City State Zip code 1. Scouting background. Position Council Position Council 1. Scouting background. Position Council Scate speries council Unit youth organizations. Previous residences (for last five City City City City State Zip code The information obtained in this unit by paying \$1 for processing the transfer. Mark and attach certificate. It will be returned by the council. Suffix 4. Current memberships (religious business, labor, or professional business, labor, or professional business, labor, or professional surface as it relates with your character as it relates Country Mailing address Country Mailing address State Zip code | |
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| internal use of the BSA only. Council No. District name | years). |
| EXPIRE DATE | years). |
| EXPIRE DATE TERM MONTHS New leader Former leader If applicant has an unexpired membership certificate; registration may be accomplished in this unit by paying \$1 for processing the transfer. Mark and attach certificate. It will be returned by the council. TRANSFER FROM: COUNCIL NO. TYPE OF UNIT UNIT NO. 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 4. Current memberships (religious business, labor, or professional business, labor, or professional business, labor, or professional business.) Have you completed: Youth Protection training Fast Start training | years). |
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| US necessary. | ICONCU WIICII |
| Home phone Business phone Ext. Cell phone Telephone (| |
| Name | |
| Date of birth (mm/dd/yyyy) Ethnic background: Driver's license No. State Name | |
| Edition Black (Imite dailyyyy) African American Native American Alaska Native Asian Native American Alaska Native Asian 6. Additional information. | Yes or N |
| Caucasian/White Hispanic/Latino Pacific Islander Other (Mark each answer.) | |
| Gender Social Security number (required) Occupation Employer a. Do you use illegal drugs? | 000 |
| M F b. Have you ever been convicte a criminal offense? (If yes, explain below.) | d of O |
| Country Business address City State Zip code c. Have you ever been charged | with 🔘 🤇 |
| Child neglect or abuse? | |
| d. Has your driver's license eve Position Code Scouting position (description) Are you an Eagle Scout? Date earned (mm/dd/yyyy) been suspended or revoked? | |
| Ves No (If yes, explain below.) | |
| e. Other than the above, is there fact or circumstance involvin | you |
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| | |
| Signature of applicant Date (ACCEPTED) Signature of Scout executive or designee Date Signature of Scout executive or designee D | te |
| Registration fee \$ Boys' Life fee \$ APPLICANT COPY Retain on file for three years. | |



Training for New Volunteers

Welcome to Scouting! As a new Scout volunteer, you are joining our Scouting tamily, 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.

Every Boy Deserves a Trained Leader

First things first! There are two types of training to begin your road to success. They are Fast Start Orientation, which presents a quick introduction to get new volunteers ready for your first meeting or activity, and Youth Protection training.

What Is Youth Protection Training?

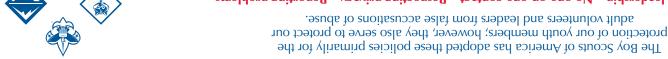
We seek to create as safe an environment as possible for young people to enjoy our program's activities. The Boy Scouts of America Youth Protection training addresses strategies for personal safety awareness for youth as well as adults. Age-appropriate programs and DVD materials include:

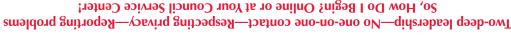
- Youth Protection Guidelines: Training for Volunteer Leaders and Parents—Adults come away with a much clearer awareness of the kinds of abuse, the signs of abuse, and how to respond and report should a situation arise.
 Youth Protection Guidelines: Training for Adult Venturing Leaders—Designed to give 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.

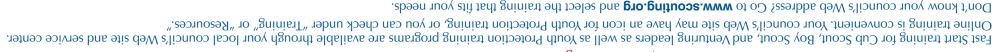
 It Happened to Me—Developed for Cub Scout—age boys from 6 to 10 years old and their parents. It addresses the four rules of personal safety: Check first, go with a friend, it's your
- body, and tell.

 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.







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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)

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|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Venturing crew Advisors, assistant Advisors, and crew compileted New Leader Essentials and Venturing Leader Specific |
| Assity Scout leaders and assistants are considered trained when they have completed New Leader Essentials, Varsity Scout Leader Specific Training, and Introduction to Outdoor eader Skills. |
| Troop committee members are considered trained when they have completed New Leader Essentials and the Troop Committee Challenge as their leader-specific training. |
| and Introduction to Outdoor Leader Skills. |
| coutmasters and assistant Scoutmasters are considered trained when they have completed New Leader Essentials, Scoutmaster and Assistant Scoutmaster Leader Specific Training, |
| ssentials. |
| Cub Scout leaders are considered trained when they have completed Fast Start training, Youth Protection training, Cub Scout Leader Position Specific Training, and New Leader |
| sedidelines |
| |

National Parent Initiative

The National Parent Initiative 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:

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.