



Lincoln Heritage Council

Prepared. For Life.™

Boy Scouts of America

MERIT BADGE COUNSELOR APPLICATION

(Please type or print completely)

Name: _____ Date of Birth: ____/____/____ Home Phone: _____

Address: _____ Mobile Phone: _____

City: _____ State: _____ Zip Code: _____

Email Address: _____

Youth Protection is REQUIRED. Youth Protection Training Date: ____/____/____

I am currently registered with _____.

(If you are not currently registered, you must attach an adult application.)

| List Merit Badge Subjects Here | Vocation Is this subject in line with your job, business, or profession? | Avocation Do you follow this subject as a hobby, having more than working knowledge of the requirements? | Special Training If not, do you have any special training for this subject? |
|--------------------------------|---|---|--|
| 1 | | | |
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PLEASE PROVIDE BRIEF INFORMATION ON PROFICIENCY OF EACH MERIT BADGE SUBJECT

Failure to provide proof of proficiency will result in the application being denied

* By signing up to be a Merit Badge Counselor with the Lincoln Heritage Council, you are allowing yourself to be contact by units and individuals for merit badge instruction.

Applicant's Signature: _____

Date: _____

Council Approval: _____

Date: _____