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 Cod
=	Telephone number of Counselor	
Signature	of counselor	/ Date
Checked a	and recorded:	
Date		Initial
Cortificato	and hadge presented:	

Certificate and badge presented:	
	Date

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

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Name of Counselor	

Address of Counselor

City	ZIP Code

Telephone number of Counselor

Signature of counselor

Date

Date

Date

Checked and recorded:

Date	Initials
Certificate and badge presented:	

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Address of Counselor	
City	ZIP Code
Telephone number of Counselor	
/	/
Signature of counselor	Date

Signature of courselor	
Checked and recorded:	

onconcou	unu	recoraca.	

Date	Initials
Certificate and badge presented: _	

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

Signature of Counselor

Signature of unit leader

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

APPLICANT'S RECORD

Name

has given me his completed application for the

Merit Badge

\_\_\_\_/\_\_\_\_ /\_\_\_\_\_ by Completed on \_\_\_\_

Signature of Counselor

Signature of unit leader

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APPLICANT'S RECORD

Name

has given me his completed application for the

Merit Badge

Completed on \_ \_\_\_\_\_ by

Signature of Counselor

Signature of unit leader

NOTE TO BOY SCOUT, VARSITY SCOUT, OR EXPLORER: Retain this copy for your permanent rocorde

COUNSELOR'S RECORD

Post   Merit Badge   Date Completed/   Remarks:   It is suggested that the counselor keep this refor at least 1 year in case any question is raise later in regard to this award.   COUNSELOR'S RECORD   Applicant	Troop	
Merit Badge   Date Completed/   Remarks:   It is suggested that the counselor keep this refor at least 1 year in case any question is raise later in regard to this award.   COUNSELOR'S RECORD   Applicant	L Team	Unit number:
Date Completed/ Remarks: It is suggested that the counselor keep this re- for at least 1 year in case any question is raise ater in regard to this award. COUNSELOR'S RECORD Applicant Troop Team Unit number: Post Merit Badge Date Completed/ Remarks: t is suggested that the counselor keep this re- for at least 1 year in case any question is raise ater in regard to this award. COUNSELOR'S RECORD Applicant COUNSELOR'S RECORD Applicant Troop Team Unit number: Post Merit Badge	Post	
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Troop Team Unit number: Post Merit Badge	CONNELL	
Team Unit number: Post Merit Badge	Applicant	
Post Merit Badge		
Merit Badge	🖵 Troop	Unit number:
-	_	
-	🖵 Team	
Date Completed / /	🖵 Team	N :: 2 :
///////	<ul> <li>Troop</li> <li>Team</li> <li>Post</li> </ul>	Merit Badge

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.

### 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.

### 7 30176 34124 8

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Requirement Date of on and letter Approval	Counselor Initial	Requirement no and letter	Date of Approval	Counselor Initial

Counselor Initial						
Date of Approval						
Requirement no and letter						
Counselor Initial						
Date of Approval						
Requirement no and letter						

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  Explorer						
	of No						
	Troop, team, post, 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						
	No. 34124 1996 Printing						

# APPLICATION FOR MERIT BADGE

Address		
City		
is a registered		
Boy Scout	Varsity Scout	Explorer
of		No
Troop, t	eam, post, ship	
District		
Council		
	ified to begin working d on the reverse side.	
Date	Signature	of Unit Leader
ВС	OY SCOUTS OF AME	RICA
No. 34124		1996 Printing
Δ	PPI ICATION F	OR

# APPLICATION FOR MERIT BADGE

Name							
Address							
City							
is a registered							
Boy Scout	Varsity Scout	Explorer					
of		No					
Troop, te	of No No						
District							
Council							
	ified to begin working d on the reverse side.						
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