# "Blue" Card – BSA Application for Merit Badge

### 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 ❑ 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

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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

_____

Signature of Counselor

_____

Signature of unit leader

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

**COUNSELOR'S RECORD**

Applicant _____

❑ Troop

❑ Team Unit number: _____

❑ Post

_____

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.**