

Example Blue Card Front

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.

#34124A



Counselor Initial	FILLED OUT
Date of approval	
Requirement No. and letter	
Counselor Initial	FILLED OUT
Date of approval	
Requirement No. and letter	

APPLICATION FOR MERIT BADGE

Name NAME

Address ADDRESS

City CITY, STATE

is a registered
 Boy Scout Varsity Scout Venturer
of TROOP No. 55

Troop, team, crew, ship
District TWIN BAYOU

Council SAM HOUSTON AREA

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

DATE UNIT LEADER

Date Signature of unit leader



BOY SCOUTS OF AMERICA®
34124A PATROL
2003 Boy Scouts of America NAME

Example Blue Card Back

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

FULL MERIT BADGE NAME

Merit badge

COUNSELOR'S FULL NAME

Name of counselor

ADDRESS OF COUNSELOR

Address of counselor

CITY, STATE

ZIP #

City Zip code

COUNSELOR TELEPHONE NUMBER

Telephone number of counselor

COUNSELOR SIGNATURE / /

Signature of counselor Date

Checked and recorded:

Date DO NOT USE THIS SPACE

Certificate and badge presented _____
Date

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

APPLICANT'S RECORD

Name SCOUT'S FULL NAME

has given me his completed application for the

FULL MERIT BADGE NAME

Merit badge

Completed on COMPLETION DATE by _____
Date

COUNSELOR SIGNATURE

Signature of counselor

2nd UNIT LEADER SIGNATURE

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

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.