VIKING COUNCIL BOY SCOUTS OF AMERICA

REGISTRATION COLLEGE OF COMMISSIONER SCIENCE

Saturday, November 10, 2001

(PLEASE TYPE OR PRINT)

Name:0	COUNCIL
Address	District
CITY, STATE & ZIP	
PHONE () E-MAIL	
MY PRIMARY REGISTRATION IS: \square Roundtable \square Unit \square I	District
I hereby apply for admission to the College of Commissione	r Science in the program (Checked Below):
☐ COMMISSIONER'S BASIC TRAINING:	
☐ ROUNDTABLE CONFERENCE: I am willing to make a presentation	on on(topic)
□ BACHELORS DEGREE CANDIDATE: I completed COMMISSIONER'S BASIC TRAINING DISTRICT of the I am selecting the following two courses as my electives: #	COLINCII
☐ MASTERS DEGREE CANDIDATE: I received my BACHELORS OF COMMISSIONER SCIENCOUNCIL. I am selecting the following two courses as my electives: #	, , -
□ DOCTORS DEGREE CANDIDATE: I received my MASTERS OF COMMISSIONER SCIENCE COUNCIL. I am selecting to	CE DEGREE on (date) in the he following course as my elective: #
☐ ADVANCED STUDIES CANDIDATE:	
I received my MASTERS OF COMMISSIONER SCIENCE COUNCIL OR my DOCTORS in the	OF COMMISSIONER SCIENCE DEGREE on (date)
All Registration fees incl	ude a box lunch
Roundtable Conference Fee \$20.00 \$(A_2 Day Course Audit Fee \$12.00 \$(A_3 Commissioner Basic Fee \$12.00 \$(A_3 Staff only Fee \$12.00 \$(A_3 Add Appropriate Late fee \$ TOTAL ENCLOSED \$	After October 15, 2001 Add \$10.00) After October 15, 2001 Add \$10.00) After October 15, 2001 Add \$6.00) After October 15, 2001 Add \$6.00) You will receive your class schedule when you check in Saturday morning.
Please make check payable to Viking Council, BSA & mail with app Rita Johnson, CCS	lication to: CODE: 050

Viking Council, BSA 5300 Glenwood Avenue Minneapolis, MN 55422

Visit our Website at www.vikingbsa.org

Questions: Bob Thielen Viking Council 763-545-4550 ext. 1134

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