

## **EAGLE SCOUT RANK APPLICATION**

TO THE EAGLE SCOUT RANK APPLICANT. This application is to be completed after you have completed all requirements for the Eagle Scout rank. Print in ink or type all information. List the month, day, and year for all dates. When using computer date blocks list the date: July 8, 1970, as 07 (for July) 08 (for day) 70 (for year). When you have completed this application, sign it and submit it to your unit leader.

| FOR COUNCIL USE ONLY          |  |  |  |  |  |  |  |  |  |
|-------------------------------|--|--|--|--|--|--|--|--|--|
| TYPE OF UNIT                  |  |  |  |  |  |  |  |  |  |
|                               |  |  |  |  |  |  |  |  |  |
|                               |  |  |  |  |  |  |  |  |  |
|                               |  |  |  |  |  |  |  |  |  |
| NATIONAL NO.                  |  |  |  |  |  |  |  |  |  |
|                               |  |  |  |  |  |  |  |  |  |
|                               |  |  |  |  |  |  |  |  |  |
|                               |  |  |  |  |  |  |  |  |  |
| NAME ON OFFICIAL REGISTRATION |  |  |  |  |  |  |  |  |  |
|                               |  |  |  |  |  |  |  |  |  |

| LIST YOUR FULL LEGAL   | NAME (UPTO 30 CHARACTERS ONLY).   |  | SOCIAL SECURITY NO.                   |
|--|---|--|---------------------------------------|
|  |   |  |                                       |
|  |   |  | Month Day Year                        |
| Street or R.F.D. Address                                     |   | _ Date joined a Boy Scout troop                    |                                       |
|  |   | Date became a Varsity Scout                        |                                       |
|  | City, State, Zip  | Date became a Venturer                             |                                       |
|  |   | Date of First Class Scout board of review          | V                                     |
|  | Phone (Including area code)   | Date of Star Scout board of review                 |                                       |
|  |   | Were you a Cub Scout?                              | □ Yes □ N                             |
| Troop, Team, Crew, or Ship                                   | Local No.   | Were you a Webelos Scout?                          | ☐ Yes ☐ N                             |
|  |   | Did you earn the Arrow of Light Award?             | □ Yes □ N                             |
|  | City, State, Zip  | Had you completed fifth grade upon join            | ning? □ Yes □ N                       |
|  | isability may work toward rank advancement after he nittee Policies and Procedures for details. |  | ate of birth Month Day Year           |
| REQUIREMENT 1. Be active fiter you have achieved the ra      | in your troop, team, crew, or ship for a period of at leank of Life Scout.                      |  | Life Scout Month Day Year             |
| REQUIREMENT 2. Demonstre willing to provide a recommendation | rate that you live by the principles of the Scout Oath an nendation on your behalf.             | Law in your daily life. List the names of individu | uals who know you personally and woul |
| Na   | ime   | Address  | Telephone                             |
| Parents/guardians  |   |  |                                       |
| Religious  |   |  |                                       |
| Educational  |   |  |                                       |
| Employer (if any)  |   |  |                                       |
| Two other references   |   |  |                                       |

| REQUIREMENT 3. Earn a total of 21 merit badges (required badges are listed). List the month, day, and year the merit badge was earned. |             |  |  |   |             |   |  |  |             |             |             |  |   |             |  |  |
|--|-------------|--|--|---|-------------|---|--|--|-------------|-------------|-------------|--|---|-------------|--|--|
| MERIT BADGE  | DATE EARNED |  |  | ) | UNIT<br>NO. |   |  |  | ATE<br>RNED | UNIT<br>NO. | MERIT BADGE |  | E | UNIT<br>NO. |  |  |
| 1 CAMPING  |             |  |  |   |             | 8 FIRST AID                                     |  |  |             |             | 15          |  |   |             |  |  |
| 2 CITIZENSHIP IN<br>THE COMMUNITY  |             |  |  |   |             | *†9 CYCLING <i>OR</i> HIKING <i>OR</i> SWIMMING |  |  |             |             | 16          |  |   |             |  |  |
| 3 CITIZENSHIP IN THE NATION  |             |  |  |   |             | 10 PERSONAL<br>MANAGEMENT                       |  |  |             |             | 17          |  |   |             |  |  |
| 4 CITIZENSHIP IN<br>THE WORLD  |             |  |  |   |             | †11 PERSONAL FITNESS                            |  |  |             |             | 18          |  |   |             |  |  |
| 5 COMMUNICATIONS   |             |  |  |   |             | 12 FAMILY LIFE                                  |  |  |             |             | 19          |  | Г |             |  |  |
| *6 EMERGENCY PREPARED-<br>NESS <i>OR</i> LIFESAVING  |             |  |  |   |             | 13  |  |  |             |             | 20          |  |   |             |  |  |
| 7 ENVIRONMENTAL<br>SCIENCE   |             |  |  |   |             | 14  |  |  |             |             | 21          |  |   |             |  |  |

<sup>\*</sup>Cross out badges not earned. If a crossed-out badge was earned, it may be reentered in 13 through 21.

Four of these required merit badges were earned for the Star Scout rank and three more were earned for the Life Scout rank.

**REQUIREMENT 4.** While a Life Scout, serve actively for a period of six months in one or more of the following positions of responsibility. List only those positions served after Life board of review date.

Boy Scout troop. Patrol leader, assistant senior patrol leader, senior patrol leader, troop guide, Order of the Arrow troop representative, den chief, scribe, librarian, quartermaster, junior assistant Scoutmaster, chaplain aide, instructor, historian, Venture patrol leader

Varsity Scout team. Captain, cocaptain, program manager, squad leader, team secretary, librarian, quartermaster, chaplain aide, instructor, den chief, Order of the Arrow team representative

Venturing crew/ship. President, vice president, secretary, treasurer, boatswain, boatswain's mate, yeoman, purser, storekeeper

|   |  |  |             | I             | Date of Life  |             |               |           |             |
|---|--|--|-------------|---------------|---------------|-------------|---------------|-----------|-------------|
|   |  |  |             |               | board of      | review      | Month         | Day       | Year        |
| Position                                |  | FROM   | Month       | Day           | Vaca          | ТО          | Month         | Day       | - Van       |
|   |  | 1  | Month       | Day           | Year          |             | Month         | Day       | Year        |
| Position                                |  | FROM   | Month       | Day           | Year          | ТО          | Month         | Day       | Year        |
| The project idea mus                    | While a Life Scout, plan, develop, and give least be approved by your Scoutmaster and troop rkbook, No. 18-927, in meeting this requirements.  | committee and by the council or dist   |             |               |               |             |               |           |             |
|   |  |  |             | Date proje    | ct was cor    | npleted     | Month         | Day       | Year        |
|   | Attach to this application a statement of your am is during which you demonstrated leadership s  |  |             |               |               |             |               |           |             |
|   |  |  |             | Date cor      | ference w     | as held     | Month         | Day       | Year        |
| CERTIFICATION BY 18th birthday.         | APPLICANT. On my honor as a Scout/Ventu  | urer, all statements on this application   | are true    | and correc    | t. All requ   | iirements   | were cor      | npleted p | prior to my |
| Signature of applican                   | t  | Telephone  |             |               |               | Date        |               |           |             |
|   |  |  |             |               |               |             | Month         | Day       | Year        |
| UNIT APPROVAL (pe                       | ersonal signatures required)   |  |             |               |               |             |               |           |             |
| Signature of unit lead                  | der  | Telephone  | e           |               |               | Date        | Month         | Day       | Year        |
|   |  |  |             |               |               |             |               |           |             |
| Signature of unit com                   | nmittee chair  | Telephone  | 9           |               |               | Date        | Month         | Day       | Year        |
| BSA LOCAL COUNC                         | CIL CERTIFICATION. According to the records of   | of this council, the applicant is a register   | red memb    | er of this ι  | ınit and all  | dates lis   | ted are co    | rrect.    |             |
| Signed                                  |  | Position   |             |               |               | Date        | Month         | Day       | Year        |
| ACTIONS BY EAGLE                        | E SCOUT BOARD OF REVIEW. The applicant a   | appeared before the Eagle Scout board  | of review   | on this da    | e and this    | applicati   | on was ap     | proved.   |             |
| Review date Month                       |  | n the Eagle Scout credentials.   |             |               |               |             |               |           |             |
|   | Signature of bo <mark>ard chairm</mark> an   | Si   | ignature of | council/distr | ict board rep | oresentativ | e (if applica | ble)      |             |
| I certify that all proced               | dures, as outlined in Advancement Committee Po   | olicies and Procedures, have been follow   | ved. I app  | rove this ap  | plication.    |             |               |           |             |
| Scout Executive                         |  |  | -           |               |               | Date        | Month         | Day       | Year        |
| Presentation of the the BSA local counc | rank may not be made until the Eagle Sco   | ut credentials are received by   | EA          | GLE SCO       | UT SERV       | ICE VALI    | DATION        |           |             |
|   | NATIONAL EAGLE SCOUT ASSOCIATION ASSOCIATI | achieved the Eagle Scout rank. of the Boy Scouts of America. The journal keeps NESA mem- |             |               |               |             |               |           |             |
| Sec. Man.                               | Applications are available at your local counc   | il service center.   |             |               |               |             |               |           |             |
| Ō                                       | Regular five-year memberships are \$25. Life   | memberships are \$180.   |             |               |               |             |               |           |             |
| EDITIONS OF THIS A                      | APPLICATION PREVIOUS TO THE 2000 REVIS   | SION SHOULD NOT BE USED.   |             |               |               |             |               |           |             |

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