



# Diocese of Belleville



## Religious Emblem Counselor Application

DATE OF APPLICATION:
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COUNSELOR INFORMATION	
NAME:	STREET ADDRESS:
CITY:	STATE: IL
ZIP CODE:	HOME PHONE NUMBER:
BUSINESS PHONE NUMBER:	CELL PHONE NUMBER:
DATE OF BIRTH:	MARITAL STATUS: 0 SINGLE 0 MARRIED 0 DIVORCED 0 SEPARATED 0 WIDOWED
OCCUPATION:	EMPLOYER:
EMPLOYER'S ADDRESS:	
PRIMARY SCOUTING POSITION:	SCOUT UNIT:
PARISH:	
Religious Background (Please check ALL that apply). Use additional paper if necessary.	
_____ Catholic Elementary School	_____ Elementary CCD Program
_____ Catholic High School	_____ High School CCD Program
_____ Catholic University	_____ RCIA Program
_____ Other – Specify: _____	
Parish / Church Activities:	
_____	
_____	
_____	
Scouting Background (List positions with dates & locations & awards)	
_____	
_____	
_____	
Community Activities, Civic Awards, Hobbies, & Other Interests:	
_____	
_____	
_____	
Explain why you want to be a Religious Emblem Counselor:	
_____	
_____	
_____	
_____	
_____	



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**REFERENCES:** The following people have known me for some time and would be willing to provide the committee a reference:

Name:	Phone No.:
Name:	Phone No.:
Name:	Phone No.:

I, the undersigned, hereby make application to become a religious emblems counselor. The information provided herein is true and correct. I authorize the Diocesan Catholic Committee on Scouting to contact the above-named references.

APPLICANT'S SIGNATURE:

DATE

PASTOR'S APPROVAL

**PARISH ENDORSEMENT**

I, the undersigned, certify that the above-mentioned person is an active member of my parish. I further endorse this person as a Religious Emblems Counselor, within this Diocese, with the duty and responsibility of guiding the faith development of Catholic youth. To my knowledge, the above-mentioned person is qualified to work with youth, in accordance with our diocesan Youth Protection Policy.

Signature of Pastor of his designate:

Date:

### Certification Record

In order to complete the certification process, the candidate must submit proof of the following with this application:

- \_\_\_\_\_ 1. Current BSA registration
- \_\_\_\_\_ 2. Current BSA Youth Protection Training
- \_\_\_\_\_ 3. Attendance at a Religious Emblems Counselor Training Program
- \_\_\_\_\_ 4. Current Diocesan Youth Protection Training