

**Buffalo Diocesan Catholic Committee on Scouting
Religious Emblems Program
Counselor Application**

Please return completed form to:
James Smyczynski, Chairman
Buffalo Diocesan Catholic Committee on Scouting
8 Forestbrook Court
Getzville, New York 14068

Name (Last, First)

Address

Town State ZIP+4

E-Mail Address

Home Telephone Business or Cell Telephone

Home Parish

<p>Organization <input type="checkbox"/> Boys Scouts</p> <p>Council <input type="checkbox"/> Allegheny Highlands <input type="checkbox"/> Greater Niagara Frontier <input type="checkbox"/> Iroquois Trails</p> <p>District <input type="checkbox"/> Professional</p>	<p><input type="checkbox"/> Girl Scouts</p> <p>Council <input type="checkbox"/> Western New York <input type="checkbox"/></p> <p>Neighborhood <input type="checkbox"/> Professional</p>	<p><input type="checkbox"/> Camp Fire</p> <p><input type="checkbox"/></p> <p><input type="checkbox"/> Professional</p>
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Unit Location (Town) Unit Type Number

Emblems Counseling

<input type="checkbox"/> Light of Christ	<input type="checkbox"/> Family of God
<input type="checkbox"/> <i>Parvuli Dei</i>	<input type="checkbox"/> I Live My Faith
<input type="checkbox"/> <i>Ad Altare Dei</i>	<input type="checkbox"/> Mary, the First Disciple
<input type="checkbox"/> Pope Pius XII	<input type="checkbox"/> Spirit Alive

Parish Endorsement

I, the undersigned, certify that the aforementioned person is an active member of my parish. I further endorse this person as a Religious Emblems Counselor under the auspices of the Buffalo Diocesan Catholic Committee on Scouting with the duty and responsibility of guiding the faith development of Catholic youth. To my knowledge, the aforementioned person is qualified to work with youth in accordance with our Diocesan youth protection policy.

Signed: _____ Date: _____
Pastor or Designee

Organization(s) Endorsement

(Note: Please complete an endorsement for each youth organization you serve)

I, the undersigned, certify that the aforementioned person is an active member of the youth organization noted below. I further endorse this person as a Religious Emblems Counselor under the auspices of the Buffalo Diocesan Catholic Committee on Scouting with the duty and responsibility of guiding the faith development of Catholic youth. To my knowledge, the aforementioned person is qualified to work with youth in accordance with our organization’s youth protection policy.

Signed: _____ Date: _____
Unit Leader or Designee

Unit _____ Position in Organization: _____

Signed: _____ Date: _____
Unit Leader or Designee

Unit _____ Position in Organization: _____

Signed: _____ Date: _____
Unit Leader or Designee

Unit _____ Position in Organization: _____

Counselor Commitment

By signing this application, I commit myself to the well-being of the youth I serve by attending appropriate training courses, including the Buffalo Diocese *Protecting God’s Children* program and following the polices of my youth organization(s) and the Buffalo Diocesan Catholic Committee on Scouting.

I understand the responsibilities and duties of a Religious Emblems Counselor of the Buffalo Diocesan Catholic Committee on Scouting and will adhere to all guidelines of the Committee. I will do my best to assist any youth to grow in faith-life, to earn the appropriate religious emblem, and to seek assistance when in need.

Signed: _____ Date: _____

Committee Approval

In consideration of this application, I approve the individual as a Religious Emblems Counselor of the Buffalo Diocesan Catholic Committee on Scouting.

Signed: _____ Date: _____