DISCLOSURE/AUTHORIZATION FORM

NOTICE TO APPLICANT REGARDING BACKGROUND CHECK

In order to safeguard the youth in our program, the Boy Scouts of America will procure consumer reports on you in connection with your application to serve as a volunteer, and the Boy Scouts of America may procure additional consumer reports at any time during your service as a volunteer in order to evaluate your continued suitability for volunteer service. The Boy Scouts of America has contracted with LexisNexis, a consumer reporting agency, to provide the consumer reports. LexisNexis may be contacted by mail at LexisNexis, 1000 Alderman Drive, Alpharetta, GA 30005 or by telephone at 800-845-6004.

The consumer reports may contain information bearing on your character, general reputation, personal characteristics, and mode of living. The types of information that may be obtained include but are not limited to Social Security number verification, sex offender registry checks, criminal records checks, inmate records searches, and court records checks. The information contained in these consumer reports may be obtained by LexisNexis from public record sources.

The consumer reports will not include credit record checks or motor vehicle record checks.

The nature and scope of the consumer reports are described above. Nonetheless, you are entitled to request a complete and accurate disclosure of the nature and scope of such reports by submitting a written request to LexisNexis at the address listed above. Additional notices for applicants in California, New York, Minnesota, and Oklahoma are provided.

APPLICANT'S ACKNOWLEDGMENT AND AUTHORIZATION

I have carefully read this notice and authorization form and I hereby authorize the Boy Scouts of America and LexisNexis to procure a consumer report, which as described above will include information relating to my criminal history as received from reporting agencies. I understand that this information will be used to determine my eligibility for a volunteer position with the Boy Scouts of America. I also understand that as long as I remain a volunteer, additional consumer reports may be procured at any time. I understand that if the Boy Scouts of America chooses not to accept my application or to revoke my membership based on information contained in a consumer report, I will receive a summary of my rights under the Fair Credit Reporting Act and contact information for the reporting agency, LexisNexis.

ADDITIONAL NOTICES TO CALIFORNIA, MINNESOTA, OKLAHOMA, AND NEW YORK APPLICANTS

California

Under California law, the consumer reports described above that the Boy Scouts of America will procure on you are defined as investigative consumer reports. These reports will be procured in connection with your application to serve as a volunteer, and additional reports may be procured at any time during your service as a volunteer in order to evaluate your continued suitability for volunteer service. The reports may include information on your character, general reputation, personal characteristics, and mode of living.

Under section 1786.22 of the California Civil Code, you may inspect the file maintained on you by LexisNexis, during normal business hours and with proper identification. You may also obtain a copy of this file, upon submitting proper identification and paying the costs of duplication, by appearing at LexisNexis offices in person, during normal business hours and on reasonable notice, or by certified mail upon making a written request. You may also receive a summary of the information contained in this file by telephone. LexisNexis will provide trained personnel to explain any information furnished to you and will provide a written explanation of any coded information. This written explanation will be provided whenever a file is provided to you for visual inspection. If you appear in person, you may be accompanied by one other person of your choosing, who must furnish reasonable identification.

For Applicants in California, Minnesota, and Oklahoma Only

You have the right to request a free copy of any report procured on you.	If you wish to receive a free
copy of any report procured on you, check the box below.	

☐ I request a free copy of any report procured on me.

New York

As explained above, a consumer report will be requested in connection with your application, and additional consumer reports may be requested during the course of your service with the Boy Scouts of America. You have the right, upon request, to be informed whether or not a consumer report was requested and, if a consumer report was requested, of the name and address of the consumer reporting agency that furnished the consumer report.

My signature below indicates that I have read, understand, and accept the accompanying disclosures and acknowledgments.

First name (No initials or nicknames) Please print.	Middle name		Last name		Suffix
Signature of applicant		Date		Unit No.	

ADULT APPLICATION 524-501A	This form is read by mach	hine. Please print the i	numbers and letters as	shown: 1 2 3	8 4 5 6 7 8 9	0 A B C D E F G H I
Г	UNIT SCOUTERS (Fill i	in the circle.)		Council/district posit	ion	Scouting background. Position Council Year
The information obtained in this form is for the internal use of the BSA only.	Troop Team C	rew Ship Unit No.	OR	}		
		NU.		District name		Experience working with youth in other
EXPIRE DATE / /	TERM MONTHS	New leader Former	leader			organizations.
If applicant has an unexpired membership certificate; registration may	y be accomplished in this unit by pa	aying \$1 for processing the t	ransfer. Mark and attach certif	ficate. It will be returned	I by the council.	3. Previous residences (for last five years).
TRANSFER FROM: COUNCIL NO.	TYPE OF UNIT	UNIT NO.				City State
Please print one letter in each space—press hard; you are making thre	•				0.45	
First name (No initials or nicknames)	Middle name	Last name			Suffix	4. Current memberships (religious, community,
						business, labor, or professional organizations).
Have you completed: Youth Protection training	Fast Start training					5. References. Please list those who are familiar
Country Mailing address		City		State	Zip code	with your character as it relates to working with youth. References will be checked when
						necessary. Name
Home phone Business	phone	Ext.	Cell phone	9		Telephone ()
		X		-		Name Telephone ()
Date of birth (mm/dd/yyyy) Ethnic background:			icense No.		State	Name
Black/African American Caucasian/White	Native American Alaska Native Hispanic/Latino Pacific Islanc					6. Additional information. Yes or No (Mark each answer.)
Gender Social Security No. (required)	Occupation		Employer			a. Do you use illegal drugs?
O M O F						b. Have you ever been convicted of O a criminal offense? (If yes,
Country Business address		City		State	Zip code	explain below.) c. Have you ever been charged with
						child neglect or abuse? d. Has your driver's license ever
Position Code Scouting position (description)			Are you an Eagle Scout?	Date earned (mm/dd/yy	200	been suspended or revoked? (If yes, explain below.)
Scotting position (description)			Yes No	/ / / / / / / / / / / / / / / / / / /	yy) 	e. Other than the above, is there any
				/	/	fact or circumstance involving you O or your background that would call
E-mail address Work (Select one) Home		@			Boys' Life subscription	into question your being entrusted with the supervision, guidance, and care of young people? (If yes,
I understand that:	APPROVALS FOR U					explain below.)
 The information that I have provided may be verified, if necessary, by conta or organizations named in this application, or by contacting any person or organizations. 	ganization according to BSA		formation stated in this applica nt meets the leadership qualifi			
that may have information concerning me, or by conducting a criminal backg I hereby release and agree to hold harmless from liability any person or organ	nization					
that provides information. I also agree to hold harmless the chartered organiz council, Boy Scouts of America, and the officers, employees, and volunteers t	y Scouts of America, and the officers, employees, and volunteers thereof. Signature of unit committee chairman Date		APPROVAL FOR COUNCIL AND DISTRICT SCOUTERS			
 b. In signing this application, I have read the attached information and apply registration with the Boy Scouts of America. I agree to comply with the Char 	rter and			We are unaware of anything contrary to the information stated in this application. This application has been reviewed		
Bylaws, and the Rules and Regulations of the Boy Scouts of America and the Laffirm that the information I have given on this form is true and correct. I have	ave completed			according to BSA procedures and this applicant meets the leadership qualifications of the Boy Scouts of America:		
Youth Protection training and will follow the Youth Protection guidelines.	Signature of Chart	ioroa organization neau of 16	pprosentative	Date	ioadoronip quantica	aono or allo boy occurs of Alliotton.
Signature of applicant	Date (ACCEPTED) Signa	ature of Scout executive or d	esianee	Date	Signature of Scout 6	executive or designee Date
4001 Registration fee \$.	Boys' Life fee		LOCAL COUN		Retain on file for three	•