

# Religious Emblem Counselor Application

## Diocese of Raleigh

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip + Four: \_\_\_\_\_

Phone No.: H) (\_\_\_\_) \_\_\_\_\_ B) (\_\_\_\_) \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Marital Status: \_\_\_\_\_ Spouse's Name: \_\_\_\_\_

Occupation: \_\_\_\_\_ Employer: Name: \_\_\_\_\_

Employer's Address: \_\_\_\_\_

Parish: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Primary Scouting Position: \_\_\_\_\_ Scout Unit: \_\_\_\_\_

---

---

**Religious Background** (Please Check **ALL** that apply) Use Additional Paper if Necessary to give details (dates, course names, etc.).

\_\_\_\_\_ Catholic Elementary School                      \_\_\_\_\_ Elementary CCD Program  
\_\_\_\_\_ Catholic High School                              \_\_\_\_\_ High School CCD Program  
\_\_\_\_\_ Catholic College/University                      \_\_\_\_\_ RCIA Program  
\_\_\_\_\_ Other - Specify: \_\_\_\_\_

**Adult religious/faith continuing education:**

\_\_\_\_\_ Parish CCD/PSR Teacher                      \_\_\_\_\_ RENEW Leader  
\_\_\_\_\_ Catholic Faith Workshops/Courses - If **YES**, please list: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_ Other - Specify: \_\_\_\_\_  
\_\_\_\_\_

Parish/Church Activities: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

---

---

**Scouting Background** (List positions with dates and locations & awards)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

---

---

**Community Activities, Civic Awards, Hobbies, & Other Interests:** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Explain why you want to be a Religious Emblems Counselor:** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

---

---

**REFERENCES:** The following people have known me for some time and would be willing to provide the Diocesan Catholic Committee on Scouting 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 reverences.

\_\_\_\_\_  
Applicants Signature Date

---

---

**PARISH ENDORSEMENT**

I, the undersigned, certify that the above named 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 named person is qualified to work with youth, in accordance with our diocesan youth protection policy.

\_\_\_\_\_  
Pastor or his designate Date

Return to: Rev. Scott McCue, Diocesan Scout Chaplain, St. Thomas More Catholic Church, 940 Carmichael St, Chapel Hill, NC 27514

Please include a copy of Diocesan Safe Environment Training Certificate and BSA Registration Card.

---

---

**FOR DIOCESAN USE ONLY**

**Certification Record**

BSA Registration Verified: \_\_\_\_\_ Scouter Development: \_\_\_\_\_

Counselor Training: \_\_\_\_\_ Youth Protection Training: \_\_\_\_\_

References Checked by: \_\_\_\_\_ Date: \_\_\_\_\_

Interview by: \_\_\_\_\_ Date: \_\_\_\_\_

Approved: \_\_\_\_\_ Date: \_\_\_\_\_

For the following Emblems:

\_\_\_\_\_ Pack Religious Emblems Coordinator. \_\_\_\_\_ Ad Altare Dei. \_\_\_\_\_ Light is Life. \_\_\_\_\_ Pope Pius XII.

Commission Valid Until: \_\_\_\_\_ Religious Emblem Counselor Number: \_\_\_\_\_