

**Diocese of Dallas  
Religious Emblem Counselor Application**

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

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

City: \_\_\_\_\_ State: TX Zip Code: \_\_\_\_\_

Phone No.: H) \_\_\_\_\_ B) \_\_\_\_\_ C) \_\_\_\_\_

Email: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Marital Status: \_\_\_\_\_ Occupation: \_\_\_\_\_

Employer: \_\_\_\_\_ Parish: \_\_\_\_\_

Current Scouting Position: \_\_\_\_\_ Unit: \_\_\_\_\_

Chartered Organization \_\_\_\_\_

Council: Circle 10 District: \_\_\_\_\_

**COUNSELOR COMMITTEMENT**

By signing this application, I commit myself to the well-being of the youth I serve. I will attend and keep current with the appropriate training, including Diocesan Safe Environment, and BSA youth protection. I understand the responsibilities and duties of a Religious Emblems Counselor of the Diocese of Dallas. I will do my best to assist any your to grow in faith, and to earn their religious emblems(s).

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

**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.

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

Parish \_\_\_\_\_

**Certification Record**

In order to complete the certification process, the candidate must

- \_\_\_\_\_ 1. Attend a Diocesan Religious Emblems Counselor Training Program.

Submit proof of the following with this application:

- \_\_\_\_\_ 2. Current BSA registration  
\_\_\_\_\_ 3. Current BSA Youth Protection Training  
\_\_\_\_\_ 4. Diocesan Safe Environment Training,

Mail completed application to:  
Pat Tidwell  
708 Water St., Apt. D  
Waxahachie, TX 75165  
or  
email: texasscouter@aol.com