



Atlanta Archdiocesan Catholic Committee on Scouting



Archdiocese Notification of Intent to Begin Religious Awards Program

(Make copies of this form and three weeks prior to the beginning of each course send a copy to the Archdiocese Catholic Committee, Attn: Girl Scout Emblems Chair, Elvira McClain, 2563 Mural Drive Chamblee GA 30341)

Date of Notification: _____/_____/_____

Counselor Information:

Counselor Name: _____

Address: _____

City/State/Zip Code: _____

Telephone #: (_____) _____ -- _____

E-mail Address: _____

Date I received my Religious Emblem Counselors Training: _____/_____/_____

Date I received my Archdiocese Safe Environment Training: _____/_____/_____

Pastor's Approval:

Parish _____

I hereby certify that the above named person is a member of my parish, has completed the Archdiocese Volunteer Application and Background Checks, and have no objections to his/her functioning as a youth minister in the Religious Emblems Program.

Pastor's Signature: _____ Date: _____

Program Information: Circle program: (Family of God) (I Live my Faith) (Marian) (Spirit Alive)

Date Program is Starting _____ Number of Participants: _____