

BSA Leave No Trace Master Educator Course Instructor Application

This form will be utilized to document an individual's request to be considered as a BSA Nationally sponsored Master Educator course co-instructor/lead instructor.

| | |
|----------------------------------|-----------------------------|
| Applicants Name: | Applicants address: |
| Applicants Email Address: | Applicants Phone No: |

Applying for (circle one):

Co-Instructor **Lead Instructor**

My Master Educator Course Location:

My Master Educator Course Dates:

My Master Educator Course Lead Instructor:

My Master Educator Course Co-Instructor(s):

I led my Trainer Course (BSA course recommended) at Location #1:

Trainer Course Dates:

Trainer Course Lead Instructor Contact Information:
Name: _____
Phone Number: _____
Email Address: _____

I led/participated in Trainer Course at Location #2:

Trainer Course Dates:

Trainer Course Lead Instructor Contact Information:
Name: _____
Phone Number: _____
Email Address: _____

