**Boy Scouts of America – Greater New York Councils**

**Supernova Awards Mentor Information**

**Thank you for your interest in being a Supernova Mentor.** The information below will be used by Scouts to contact you about mentoring assignments and by the Council to provide you updated program information.

**Contact Information**

|  |  |
| --- | --- |
| Name |  |
| Phone |  |
| Address |  |
| Email |  |

**Membership Information Training Date Information**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Registration Year |  |  | Supernova Mentor Training (D82) |  |
| BSA ID |  |  | YPT (Y01) |  |
| Unit |  |  | Venturing YPT (Y02) |  |
| District |  |  | I am at least 21 years old |  |

**Supernova Assignment Preferences**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| * Select the Supernova award(s) that you would like to mentor. | **Cub Scouts** | | **Webelos Scouts** | | **Boy Scouts** | | **Venturers** | |
|  | Dr. Luis W. Alvarez |  | Dr. Charles H. Townes |  | Dr. Bernard Harris |  | Dr. Sally Ride |
|  | | | |  | Thomas Edison |  | Wright Brothers |
|  | | | | | |  | Dr. Albert Einstein |

Include my name and phone number in the Supernova Mentor List available to unit leaders:

|  |  |  |  |
| --- | --- | --- | --- |
|  | Yes |  | No |

I wish to work with youth ONLY from my unit:

|  |  |  |  |
| --- | --- | --- | --- |
|  | Yes |  | No |
| **To qualify as a Supernova Awards Mentor, you must**   * Be at least 21 years old and of good character. * Be able and willing to work with Scout-age youth. * Be knowledgeable in some STEM field(s) by education, vocation, hobby, or other life experiences. * Submit to the council: (GNYC STEM will check these off as completed) * Proof of YP training appropriate for the level(s) you will mentor, * Completed BSA adult reg. form (position code 52) * If not registered in another capacity with the BSA, please include receipt for Registration Fee in the amount of **$25.00** * Completed Supernova Awards Mentor Information form (this form). | | | | | | **As a Supernova Awards Mentor, I agree to**   * Follow the requirements of the awards, making no deletions or additions, ensuring that the advancement standards are uniform for all Scouts. * Have a Scout accompanied by a buddy during all instructional sessions. * Keep my Youth Protection Training current. * Renew my BSA adult registration annually if I plan to continue as a Supernova Awards Mentor. |

In the space below and on the back of this page, please ***briefly*** list or describe your experience in one or more STEM fields. Experiences may come from education, vocation, hobby, or other life experiences.

|  |  |
| --- | --- |
|  | I wish to register (first time) as a Supernova Mentor. |
|  | I wish to re-register as a Supernova Mentor. |

|  |  |  |  |
| --- | --- | --- | --- |
| Signature |  | Date: |  |

**Please submit your complete application and appropriate attachments to**:

GNYC STEM Sub-committee c/o Shawn Spencer or Donnie Collins via email: Cubpack255@hotmail.com