

Diocese of Scranton

*Office for Parish Life
Youth and Young Adults*

APPLICATION FOR BISHOP'S EAGLE SCOUT CERTIFICATE

Date _____

Eagle Name _____

Eagle Address _____

City/State/Zip _____

Troop # _____ Council _____

Parish Name _____

Parish Address _____

City/State Zip _____

Pastor's Signature _____

(will not be accepted without this signature)

Date of Presentation (if known) _____

Completed certificates should be sent to: _____

Mail application to: Office for Parish Life
330 Wyoming Ave.
Scranton, PA 18503

For questions, please call the Office for Parish Life at: Telephone: (570) 207-2213 Fax: (570) 207-2204

Please allow 6 weeks for processing

for office use only

received _____
issued _____
sent _____
letter _____