San Diego-Imperial Council       Boy Scouts of America

Merit Badge Experience Survey

Name of Merit Badge: __________________________    Date: ________________

Name of Merit Badge Counselor: ____________________________

Date of First Meeting with Merit Badge Counselor: _________________

Date Counselor’s Signature was obtained: ________________

Circle the appropriate rating

1. Was it easy to contact the Merit Badge Counselor?  Yes  Somewhat  No
2. Was the Counselor helpful and courteous?  Yes  Somewhat  No
3. Did the Counselor seem to know the subject?  Yes  Somewhat  No
4. Did the Counselor treat you fairly?  Yes  Somewhat  No
5. Was the Counselor receptive to your questions?  Yes  Somewhat  No
6. Did the Counselor make the subject interesting?  Yes  Somewhat  No
7. Did the Counselor add to the requirements of the badge?  Yes  Somewhat  No
8. Did the Counselor skip any requirements of the badge?  Yes  Somewhat  No
9. Did you understand the merit badge requirements?  Yes  Somewhat  No
10. Were you prepared to answer or ask questions?  Yes  Somewhat  No
11. Did you read the merit badge pamphlet?           Yes  Somewhat  No
12. Would you recommend this Counselor to another Scout?  Yes  Probably  No

Comments: ____________________________________________________________________________
_____________________________________________________________________________________

Thank you for taking the time to answer these questions. Your responses will help us to deliver
a quality advancement program. Submit this form to San Diego-Imperial Council, Advancement
Committee, 1207 Upas Street, San Diego CA 92103.

Name of Scout (optional): ___________________________  Unit #: ________________