

# COLLEGE OF COMMISSIONER SCIENCE REGISTRATION

Name: \_\_\_\_\_ Name on Certificate if different \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Council: \_\_\_\_\_ District: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

**Current Registered BSA Position (Select One):**

- Unit Commissioner                       Asst. District Commissioner                       District Commissioner  
 Roundtable Commissioner                       Roundtable Staff                       Other

Have you completed Commissioner Basic Training? Yes \_\_\_ No \_\_\_ Date: \_\_\_\_\_

Any Previous College of Commissioner Science Degree Earned: \_\_\_\_\_

**BACHELOR'S DEGREE REQUIREMENTS:**

Completion of Commissioner Basic Training  
 Complete a total of 7 courses  
**(at least 5 at the Bachelor's program level)**

**MASTERS DEGREE REQUIREMENTS:**

Completion of Bachelor's Degree  
 Complete 7 additional courses  
**(at least 5 from the Master's program level)**

**DOCTORATE DEGREE REQUIREMENTS:**

Completion of master's degree  
 Completion of 10 additional courses  
**(at least 5 from the doctorate program level.)**  
 Completion of Doctorate Thesis approved by Council Commissioner

Note: Classes are only offered once, please make sure you are selecting only 1 choice per class period

Commissioner Basic Training

OR-

1	Mark 1 from this row	<input type="checkbox"/> BCS 101	<input type="checkbox"/> MCS 301	<input type="checkbox"/> DCS 501	<input type="checkbox"/> BCS 110	<input type="checkbox"/> BCS 150
2	Mark 1 from this row	<input type="checkbox"/> BCS 102	<input type="checkbox"/> MCS 303	<input type="checkbox"/> DCS 502	<input type="checkbox"/> BCS 112	<input type="checkbox"/> BCS 151
3	Mark 1 from this row	<input type="checkbox"/> BCS 103	<input type="checkbox"/> MCS 304	<input type="checkbox"/> DCS 503	<input type="checkbox"/> BCS 116	<input type="checkbox"/> BCS 152
4	Mark 1 from this row	<input type="checkbox"/> BCS 104	<input type="checkbox"/> MCS 306	<input type="checkbox"/> DCS 504	<input type="checkbox"/> BCS 130	<input type="checkbox"/> BCS 153
5	Mark 1 from this row	<input type="checkbox"/> BCS 105	<input type="checkbox"/> MCS 308	<input type="checkbox"/> DCS 508	<input type="checkbox"/> MCS 317	<input type="checkbox"/> BCS 154
6	Mark 1 from this row	<input type="checkbox"/> BCS 106	<input type="checkbox"/> MCS 309	<input type="checkbox"/> DCS 514	<input type="checkbox"/> MCS 318	<input type="checkbox"/> BCS 155
7	Mark 1 from this row	<input type="checkbox"/> BCS 107	<input type="checkbox"/> MCS 313	<input type="checkbox"/> DCS 515	<input type="checkbox"/> MCS 324	<input type="checkbox"/> BCS 156

**REGISTRATION & PAYMENT DUE BY AUGUST 12, 2017**

MAIL COMPLETE REGISTRATION FORM & FEE TO:

**Alabama-Florida Council, BSA**  
**6801 West Main Street, Dothan, AL 36305**

