

Application for Course for Leader Trainers (SW)

To

The Dy. Director (S) Ldr. Trg.
Bharat Scouts & Guides,
National Training Centre,
Pachmarhi, M.P. 461881.

Passport
Photo in
Uniform

Sir,

I hereby apply for the Course for Leader Trainers to be held at NTC Pachmarhi from _____ to _____

1. Name of State :
2. Full Name (In Block Letters) :
3. Full Home Address :
.....
.....
..... PIN Code :

E-mail Mob.

UID
.....

4. Occupation / Employment :
5. Where employed / How long :
6. Date of Birth :
7. Educational Qualification :
8. Whether have been a :
Cub / Scout / Rover, if so give
details, Place, Years etc.
9. Service in the Movement as an
Adult Leaders. Give details. Rank, Years,
Warrant Nos.
10. List of books on Scouting you
have studied.
11. Scout subject in which you are
well versed.
12. I now hold warrant for rank :
(Photocopy enclosed) Warrant No. _____ Date _____ Valid till _____

13. Past training details

Sl	Name of the Course	From	To	Place	Certificate No. & Date	Leader of the Course
1	Basic Course					
2	Advanced Course					
3	HWB Course					
4	Pre-ALT Course					
5	ALT Hon'ble Charge No	Date		Valid upto		

14. Training Courses Assisted after ALT Course

SI	Name of the Course	From	To	Type of work done	No. of Participant	Leader of the Course
1						
2						
3						
4						

* Produce Certificate issued by Competent Authority.

- 15a. Assisted Himalaya Wood Badge Course from to at
..... as full time staff. Leader of the Course
- 15b. Produce Golden Arrow Cubs / Rashtrapati Scouts / Rashtrapati Rovers in unit after receiving ALT Hon'ble Charge
16. Any special interest / skill : _____

Signature of the Candidate

Recommendation

The applicant Mr/Ms..... is an active Unit Leader of my LA/DA and is interested to spare his services in the area of Unit Leaders Training. We recommend that he / she may be admitted to the Course for Leader Trainers (SW).

State Training Commissioner (Scouts)

Forwarded to National Training Centre, Pachmarhi

Date

Signature of State Secretary

Encl :

1. Unit Running Certificate
2. Course Assisted Certificate by LOC/STC(S)
3. Attested copy of valid warrant.
4. Recommendation form.

USE FOR THE NTC OFFICE

Admitted in the Course from to

Observations if any :

DY. DIRECTOR (S) LDR. TRG.

HWB COURSE ASSISTED CERTIFICATE

This is to certify that Mr. / Ms. / Mrs.
 Cub Master / Scout Master / Rover Scout Leader of (Name of the Unit)
 has assisted full time staff during
 HWB Course for Unit C/S/R section was held at
 State from to

Leader of the Course**State Training Commissioner (S)**

***** **OR** *****

Produced Arrow Cub / Rashtrapati Scout / Rashtrapati Rover Certificate

This is to certify that Mr. / Ms. / Mrs.
 has produced the following (as per concerned section):

Two Golden Arrow Cubs

Two Rashtrapati Scouts

Two Rashtrapati Rovers

Their names and certificates number and dates are hereunder :

Name Cer.No. Date

Name Cer.No. Date

COURSE CONDUCTED (BASIC / ADVANCED) CERTIFICATE

This is to certify that Mr. / Ms. / Mrs.

Cub Master / Scout Master / Rover Scout Leader of (Name of the Unit)

..... has conducted as Leader of
 the Course as per details :

Sl	Basic / Advanced	Section	From	To	Place	State
1						
2						
3						
4						

State Training Commissioner (S)



Recommendation for appointment as
Leader Trainer (Scout Wing)

1. Name of the State Association : _____
2. Name of the Candidate : _____
(Block letters)

Passport
Size Colour
Photo
In Scout
Uniform

3. Full Postal Address : _____

_____ Pin Code

--	--	--	--	--	--

E-mail ID : _____ Phone/Mob. _____

UID _____

4. Date of Birth :

D			M			Y			
---	--	--	---	--	--	---	--	--	--

 Age : _____ Years.

5. Educational Qualifications : _____

6. Name of the Group : _____

- Charter Date.....
- Warrant No..... Date.....
- Name of District Date.....

Registered from : _____ Warrant No. _____ Date : _____

7. Completed HWB in Cub/Scout/Rover : _____

8. H.W.B. Parchment No. & Date : Parchment No. _____ Date _____

9. Pre-ALT Course : Certificate No. _____ Date _____

10. ALT Course : Certificate No. _____ Date _____

: ALT H'be No. _____ Date _____

12. Current rank in the Movement. _____

Date : _____

Signature of the Applicant

TO BE FILLED BY STATE TRAINING COMMISSIONER (S)

	Remarks
Scouting Knowledge	
Leadership Qualities	
Willingness to spare time	
Warrant Holder	

State Training Commissioner (S)

State Chief Commissioner

Date :.....

FOR THE USE AT NATIONAL TRAINING CENTRE

LT Course Certificate no. Dated

Recommendation received on :

Recommendation for appointment:

Dy. Director of Scout (Leader Training)

Chief Commissioner (Scouts)

Chief National Commissioner

Honourable Charge No. : _____ Date : _____ Issued On : _____