

THE BHARAT SCOUTS AND GUIDES

NATIONAL HEADQUARTERS

APPLICATION FOR PARTICIPATION IN INTERNATIONAL EVENTS								
Note: Fill the application form in Capital letters								
1.	Nam	ne of the St	ate Assoc	ciation				
2.	Name of the Event							
3.	Date	e of Event						
4.	Place of Event & Country							
5.	Nan	ne in full a	s in Pas	sport (Passpor	t details)		
	5.1	5.1 Surname						
	5.2	Given Nan						
	5.3	Middle Na	me					
	5.4	Passport No.						
	5.5	Date of Issue						
	5.6	5 Date of Validity						
	5.7 Place of Issue							
6.	Date of Birth							
7.	Place of Birth							
8.	Age							
9.	BSG UID No. (Mandatory)							
10.	Nationality							
11.	Education Qualification							
12.	Full Residential Address with Pin code							
13.	Mobile No.							
14.	WhatsApp No.							
15.	E-mail ID							
16.	Heig	Jht	T-Shirt Size	S M L XL	Weight		Married Unmarried	
17.	Name of Scout/Guide Group						-	
18.	Father's/Guardian's Name							

	18.1	Income		
	18.2	Occupation		
19.		when joined the nization		
20.		in the Organization		
21.	Exper	ience in the Organization		
22.	Scout	/Guide Qualification		
23.		ng Level Upto /ALT/LT		
24.	Any other Qualification			
25.	Profi	ciency in Language		
	25.1	Spoken Only		
	25.2	Spoken as well as written		
26.				
	26.1	Vegetarian		
	26.2	Non-Vegetarian		
27.	Natio	you taken part in any nal / International rence / Events ?		
	27.1	If yes Give Details		
	27.2	Any other activities, please give details with attested copies of documents		
28.	Who	will bear your expenses		
			(Please attach a certificate to that effect)	

DECLARATION

I understand the nature and purpose of the event for which I am applying, and (if selected) will assume responsibility for following all the discipline directions and for carrying out my obligations before during and after the event. I am joining this event with the consent of my parents and on my own risk and safety.

I will share the event as widely as possible with my District and State. I will ensure that the knowledge and skill gained from the event to promote and stimulate further interest in the Scout/Guide programme wherever possible.

Signature of Applicant

Signature of Parent/Guardian

Strongly recommended, School has No Objection in his participation in the event						
Signature of Head of the Institution)						
Date						
Name of the District Commissioner (S/G)						
(Signature of the Dist. Commissioner (S/G)						
Date						
RECOMMENDATION OF THE STATE AUTHORITY						
Recommended:						
Name of the State Org. Commissioner (S/G)						
Signature of the State Org. Commissioner (S/G)						
Date						
Name of the State Commissioner (S/G)						
Signature of the State Commissioner (S/G)						
Date						
Approved by State Chief Commissioner	(Yes/No)					
Signature of State Chief Commissioner						
Date						
Date						
Checked and forwarded to National Headquarters along with Caution Money of ₹.						
/- (Not refundable if selected and not participated)						
Cash / Cheque / D.D. No. /UTR No.						
Name of the State Secretary/Jt. State Secretary						
Signature of State Secretary / Jt. State Secretary						
Date						