



Recommendation for appointment as Assistant Leader Trainer (Scout Wing)

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1.	Name of the State Association :	Passport Size Colour Photo In Scout Uniform			
2.	Name of the Candidate :				
3.	Full Postal Address :				
	Pin Code				
	E-mail ID : Phone/Mob UID Online Membership Registration – visit and register at <u>www.scout.ind.in</u>				
4.	Date of Birth : D M Y Age : _	Years.			
5.	Educational Qualifications :				
6.	Name of the Group :				
	Registered from : Warrant No.				
7. Completed HWB in Cub/Scout/Rover :					
	Name of District Place				
8.	H.W.B. Parchment No. & Date : Parchment No.	Date			
9.	Pre-ALT Course : Certificate No.	Date			
10.	ALT Course : Certificate No.	. Date			

11. Details of Training Course after completing Pre-ALT :

Courses Date	Venue	LOC	Cert.No./Date

12. Current Rank / Position 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 Commissioner (Adult Resources)

Date :....

State Secretary /Jt. State Secretary

State Chief Commissioner

FOR THE USE AT NATIONAL TRAINING CENTRE

Recommendation received on :

Recommendation for appointment :

Dy. Director Scout (Leader Training)

Chief Commissioner (Scouts)

Chief National Commissioner

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