

LAST NAME: _____ FIRST NAME: _____

ADULT TRAINING RECORD

LAST NAME: _____ FIRST NAME: _____

DOB (DD/MM/YYYY): _____

ADDRESS:

STREET: _____

CITY/TOWN: _____ STATE: _____ ZIP: _____

PHONE: _____ EMAIL: _____

UNIT #: _____ COUNCIL: _____ DISTRICT: _____

UNIT TYPE (CIRCLE): TROOP PACK CREW SHIP DISTRICT

POSITION: _____

BEGAN (MONTH, YEAR) _____

COMPLETED POS SPECIFIC TRAINING (MONTH, YEAR): _____

TYPE (CIRCLE): ONLINE IN-PERSON

BALOO (MONTH, YEAR): _____ IOLS (MONTH, YEAR): _____

UNIT #: _____ COUNCIL: _____ DISTRICT: _____

UNIT TYPE (CIRCLE): TROOP PACK CREW SHIP DISTRICT

POSITION: _____

BEGAN (MONTH, YEAR) _____

COMPLETED POS SPECIFIC TRAINING (MONTH, YEAR): _____

TYPE (CIRCLE): ONLINE IN-PERSON

BALOO (MONTH, YEAR): _____ IOLS (MONTH, YEAR): _____

UNIT #: _____ COUNCIL: _____ DISTRICT: _____

UNIT TYPE (CIRCLE): TROOP PACK CREW SHIP DISTRICT

POSITION: _____

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UNIT #: _____ COUNCIL: _____ DISTRICT: _____

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POSITION: _____

BEGAN (MONTH, YEAR) _____

COMPLETED POS SPECIFIC TRAINING (MONTH, YEAR): _____

TYPE (CIRCLE): ONLINE IN-PERSON

BALOO (MONTH, YEAR): _____ IOLS (MONTH, YEAR): _____

SUPPLEMENTAL TRAINING:

ROUNDTABLES (DATES):

UNIVERSITY OF SCOUTING:

WOOD BADGE:

DATES: _____ COUNCIL: _____

BEADING DATE: _____

LAST NAME: _____ FIRST NAME: _____

PARTICIPATION IN ANNUAL PLANNING:

ANNUAL PLANNING MEETING DATE: _____

ANNUAL PLANNING MEETING DATE: _____

ANNUAL PLANNING MEETING DATE: _____

ANNUAL PLANNING MEETING DATE: _____

ANNUAL PLANNING MEETING DATE: _____

ANNUAL PLANNING MEETING DATE: _____

CAMPING:

SUMMER RESIDENT CAMP:

DAY CAMP:

YEAR: _____ # OF NIGHTS: _____

YEAR: _____ # OF DAYS: _____

YEAR: _____ # OF NIGHTS: _____

YEAR: _____ # OF DAYS: _____

YEAR: _____ # OF NIGHTS: _____

YEAR: _____ # OF DAYS: _____

YEAR: _____ # OF NIGHTS: _____

YEAR: _____ # OF DAYS: _____

YEAR: _____ # OF NIGHTS: _____

YEAR: _____ # OF DAYS: _____

YEAR: _____ # OF NIGHTS: _____

YEAR: _____ # OF DAYS: _____

AWARDS EARNED:

DEN LEADER TRAINING AWARD DATE: _____

SCOUTER'S TRAINING AWARD DATE: _____

(CIRCLE): CUB SCOUTS SCOUTS BSA VENTURING SEA SCOUTS

SCOUTER'S KEY AWARD DATE: _____

(CIRCLE): CUB SCOUTS SCOUTS BSA VENTURING SEA SCOUTS

DISTRICT KEY DATE: _____

SCOUTER'S TRAINING AWARD FOR DISTRICT COMMITTEE DATE: _____