

QUEEN'S SCOUT APPLICATION

Note: Use Tab key to move forward or Shift + Tab to move backward between fields on form. Press F1 for help.

Please complete all sections: Completed form to be sent to SCOUTS New Zealand Regional Service Centre.

Section A: To be completed by the applicant.

Surname First Names

Residential Address Phone mobile

..... Personal No.

..... School year.

Postcode Date of Birth

Email

Unit Name Zone Name

Are you working on The Young New Zealanders Challenge of the Duke of Edinburgh Gold Award? Yes No

Estimated/Completed date

Previous Achievements / Time in SCOUTS New Zealand:

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Gold Venturer Award

Outdoors Cornerstone		Date Achieved	Personal Development Cornerstone		Date Achieved
Camp Craft Modules			Physical (20 hrs)		
Outdoor Skills Modules			Social/Life Skills Module		
Environment Modules			Personal Safety Module		
Expedition (3 Nights)			Expression Module		
			Discovery New Skill		
Community			New Experiences Cornerstone		
Helping Others (20 hrs)			Special Activity		
My Community Module			Special Event		
Emergency Plan					
Our World/Country Module			Gold Award Presented		

Queen's Scout Award

Requirement	Choice / Activity	Date Completed
Scout Service Project		
5 Day Residential Project		
Future Endeavours		
Queen's Scout Panel		
Queen's Scout Award Approved		

Date sent: Date received at Regional Service Centre

Approved by National Programmes Officer	Entered into Database	Zone Leader Advised	Badge sent
Date	Date	Date	

February 2014 Queens Scout Application form.doc

QUEEN'S SCOUT APPLICATION

Please provide a brief description your Scout Service Project, Residential Project and Future Endeavours to support this application:

Scout Service Project:

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Residential Project:

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Future Endeavours:

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Section B: To be completed by the Venturer Leader.

Queen's Scout Panel Comments.....

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I am satisfied that the above Venturer has completed all the requirements to the best of their ability and has attained a satisfactory standard of proficiency for the Queen's Scout Award. I recommend the above Venturer for this award.

Venturer Leader's name (<i>for delivery of badge</i>)		Address:
Signature	Date	
Email:		Postcode:
Phone:		Mobile:

Section C: To be completed by the Zone or Regional Venturer Leader.

Comments or Remarks.....

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Name (print) Signature Date

NB: After completing the above section, forward this application to the SCOUTS New Zealand Regional Office. The Regional Office will forward the application to the National Programmes Officer.

After processing of a successful application the National Programmes Officer will forward the badge to the Venturer Leader for presentation at an appropriate time. See next page for presentation of the certificate.

Queen's Scout and Gold Award Presentation Questionnaire

(Please complete in full. This page will be used separate from the first two pages)

Surname First Names

Your name as you would like to see it on your certificate

Residential Address Phone night

..... mobile

..... Personal No.

Postcode Unit Name

Email

I give approval for the media (if applicable) to be given my contact telephone numbers. Yes No

I wish to receive my Certificate at the following presentation:

- Wellington Auckland Christchurch Dunedin By post

My Guests details are:

Name

Name

Address

Address

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Postcode

Postcode

Comments/Highlights about my participation achieving the Queen's Scout Award. Maximum of 100 words)

(These comments will be used in the presentation booklet)

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