

THE BHARAT SCOUTS & GUIDES, NATIONAL TRAINING CENTRE, PACHMARHI { M.P. } – 461881

###### Ph. No. 07578 – 252026 (O), 252153 (R), Fax No. 07578 – 252541 - E-Mail [ntc@bsgindia.org](mailto:ntc@bsgindia.org)

Circular No. 34/3937-40 Dated : 21st Oct, 2015

**E-mail & Post**

To,

All the State Secretaries,

State Associations of

Bharat Scouts & Guides,

**Indian Union**

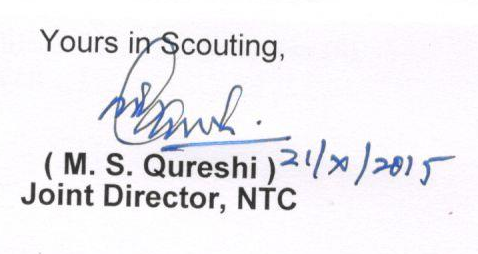
**Sub: Re-orientation Course for Trainers (Scout Wing).**

Sir/Madam,

The Re-orientation Course for Trainers (Scout Wing) is scheduled to be held at NTC, Pachmarhi. Trainers are requested to undergo Re-orientation Course who are due.

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| 1 | Name of the Course | Re-orientation Course for Trainers (Scout Wing). |
| 2 | Dates | 12.01.2016 to 14.01.2016 (Three Days). |
| 3 | Venue | Bharat Scouts & Guides, National Training Centre, Pachmarhi, M.P.-461881 |
| 4 | Registration | 12.01.2016 : Registration will start at 08.00 AM. (Late comers will not be allowed). |
| 5 | Relieving | 14.01.2016 : Reliving at 16.00 Hrs. Accordingly return reservation may be done. |
| 6 | Fee | Development Fee Rs. 200/- + Special Fee Rs. 80/- = Total Rs. 280/- only. |
| 7 | Financial Assistance | Participants have to bear their own travelling expenses. Kindly refer NTC Cir.No. 71/3574-77/2015 24th Mar, 2015. The NTC will provide free hospitality. |
| 8 | Who can Attend | All the ALT’s & LT’s (Scout Wing) who are due for Re-orientation course for Trainers are eligible. Final Information will be sent from NTC for invited Trainers. |
| 9 | What to Bring | Usual camp kit, 2 Sets of Uniform as per APRO II.  **Scout Wing:** Black Shoes with lace, Black Socks, HWB Scarf, Woggle, Nylex Belt etc & Casual Uniform as per APRO Part II.  **General Camp Kit:** Mosquito net, Bedding, Torch, Chart Paper, Pen, Pencil, Marker Pen, 200 page Notebook, Personal Medicines etc are required.  **Books** : APRO Part I, II, Scheme of Training, Job Profile, Scouting for Boys.  **Note** : Only BSNL, Idea & Vodafone networks are available in Pachmarhi. |
| 10 | Quota | 04 Trainers from each state. Final Information will be sent on first come first served bases. |
| 11 | Last Date | 31st December, 2015 |

Application duly filled in and recommended by state officials should reach at NTC on or before the last date. Late applications will not be accepted. Your co-operation is solicited.



Thanking you.

Yours in Scouting,

**( M. S. Qureshi )**

**Joint Director, NTC**

Encl.: Application Form.

Copy to :

1. All the NHQ office Bearers.
2. All the Asst. Directors for necessary follow up.
3. The Public Relation Officer for publication in NHQ Magazine.
4. All the State Trg. Commissioner (S) for necessary action.

**THE BHARAT SCOUTS & GUIDES, National Training Centre, Pachmarhi**

**Application for Re-orientation Course for Trainers**

Place : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ : From \_\_\_\_\_\_\_\_\_\_ to \_\_\_\_\_\_\_\_\_\_\_

Photo

Name of the State Association : ……………………………………………….

(I) Full name (In block letters) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Assistant Leader Trainer / Leader Trainer : ……………………………. Section : C / S / R

Hon'ble Charge No. …………………………………. Date : …………………….. Valid till : …………………

Last Re-orientation Course for Trainers attended : Place : …………………………………………………

From ……………... to ……………...

(2) Full Postal address : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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DOB : ……………..… E-mail ID : ………….…………………………… Mob.No. …………………………

(3) Occupation : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(4) Date of Birth and age : Date ……… Month …………. Year …………… (Age ………………)

(5) Educational qualification : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(6) Name of the Unit : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(7) Any other qualification : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date : Signature of the Applicant

**Recommended for admission**

District Commissioner (S) District Training Commissioner (S)

District : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ District : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Recommendation of S.T.C. (S)

Date : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Forwarded through State Secretary**