**THE BHARAT SCOUTS & GUIDES, NATIONAL TRAINING CENTRE, PACHMARHI, M.P.**

**Application for admission to Advanced Course for Cub Masters**

1 Name of the State Association : ………………………………………………………………………

2 Name of the applicant (In block letters).: ……………………………………………………………………………………...

3 Address: ……………………………………………………………………………..

……………………………………………………………………………..

……………………………………………………………………………... Pin Code : ………………….. District : ……………………………...…

E-mail I D: …………………………………………Mobile No. …………………………………………………………….….

4 Occupation: ……………………………………………………………………………………………………………………..

5 Date of Birth: ……………………………. ( in words ) ………………………………………………………………………

6 Educational Qualification and experience, if any: …………………………………………………………………………… Basic Course attended: Venue : …………………………………………………………………………………. From ………………...… to …………………..… Certificate No……………………..…....... Date ……………….…… .

7 Warrant No. ……………………………………................ Date: ………………………. (Photocopy attached).

8 Rank in the movement at present. …………………………………………………………………………………..

9 Name of the Unit: ……………………………………………………………………………………………………… Charter Number: ………………………………………… Date: ………………………… (Photocopy attached).

10 Years of Experience as a Scouter. ……………………………………………………………………………………………..

11 Special Hobbies, if any. …………………………………………………………………………………………………………

12 Other special information. ………………………………………………………………………………………………………

……………………………………………………………………………………………………………………………

…………………………………………………………………………………………………………………………… Date: …………………. Signature of Applicant Signature of District Training Commissioner (S) Signature of District Commissioner (S)

Signature of State Training Commissioner (S) Signature of State Secretary/Jt.S. Secretary

Encl.:

1. Copy of warrant with validity.

2. Copy of Charter.

3. Unit Running Certificate.

UNIT RUNNING CERTIFICATE

This is to certify that Mr./ Ms. / Mrs. …………………………………………Cub Master/Lady

Cub Master / Lady Scout Master / Rover Scout Leader of (Name of the Unit) ……………

..………………………………………… ……………………………….….

His / her Warrant No. is . ………...…………....……………….. dated ……………… and

Group Charter No. is ………………………………..… dated ………...

He / she is running Unit effectively.

D.O.C. (S) D.T.C.(S) District Commissioner (S)