**SHQ Serial No …………………………….… RHQ Serial No…………………………..**



**THE BHARAT SCOUTS AND GUIDES**

**NATIONAL HEADQUARTERS, NEW DELHI**

**Registration Form for Rashtrapati Scout Award**

**(To be filled by the candidate in his own handwriting in capital letters.**

**Photo in uniform**

**Attested by**

Head of Institution/

Group Leader

**Overwriting/use of fluid will not be accepted)**

State

1. **Name of the Scout**
2. **(A) Father’s Name**

(B) Mother’s Name

1. **Date of Birth**

***(*Supported by Admit Card/Mark Sheet/Certificate of class X/Secondary Board**

**Examination, attested copy of certificate should be attached)**

1. **Home Address**

**P.O.** **District** **State** **Pin code** **Telephone/Mob. No**.

 **E-mail ID** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Aadhaar No**.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 **(Attach photocopy of Aadhaar Card)**

1. **Name and address of Unit**

,,,,,, **District**

**Charter No.** **Date of Issue** **Date of Validity**

**Signature of** **Scout Master** **Signature of Scout**

6. **Name of the** **Scout Master**

Scouting Qualification: - \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Certificate No:-.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date:-\_\_\_\_\_\_\_\_\_\_

**Warrant No**. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**Date of** **Issue** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**Date of** **Validity**\_\_\_\_\_\_\_\_\_\_\_\_\_

**(Attach photocopy of Certificate/Parchment and Warrant of SM)**

**Certified that the information given above is correct as per the District / State records.**

Seal & Signature of District Organising Commissioner (Scout) Seal & Signature of District Secretary

Date: Date:

Seal & Signature of State Organising Commissioner (Scout) Seal & Signature of State Secretary

Date: Date:

**NB: Information Sheet attached.**

# For National Headquarters use

**Date of Receipt of Application at RHQ** \_\_\_\_\_\_\_**Remarks**  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Checked by (Name & Designation) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Assistant Director Signature of DD (BP)

Date of Birth Certificate

#  This is to certify that Master

S/o is a student of

 School/College studying in class

in the year\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ His date of Birth is\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(in figures)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(in words) as per his School/College record.

 Signature

Date................. (Office Seal) Head of the Institution

**THE BHARAT SCOUTS AND GUIDES, NATIONAL HEADQUARTERS, NEW DELHI**

**INFORMATION SHEET FOR SCOUT**

###### (to be attached with Rashtrapati Scout Award Registration Form)

**NB: To be filled by the Candidate in his own handwriting in capital letters. Overwriting / use of fluid will not be accepted**.

1. **Name of the Stat**e**:…………………................................................................................................................................**

2. **Name of the Scout :.......................................................................................................................................................**

3. **(A) Father’s Name** **:.................................................................................................................................................**

**(B) Mother’s Name:…………………..........................................................................................................................**

4. **Date of Birth** **:………………………...................................................................................................................................**

6**. Date of** **(I) Joining the Troop…………………………………………………………………………………………………**

**(II) Completion of Pravesh............................................................................................................................**

**(III) Investiture** **………………………………………………………………………………………………………..**

**(IV) Completion of Pratham Sopan...............................................................................................................**

**(V) Completion of Dwitiya Sopan.................................................................................................................**

**(VI) Completion of Tritiya Sopan..................................................................................................................**

**(VII) Completion of Rajya Puraskar...............................................................................................................**

**Rajya Puraskar Testing Camp held at.....................................................from.............................to...........................** **Certificate No....................................................................Date of Issue...................................................................**

**11 (10) of APRO II (Detail of Proficiency Badges earned for Dwitiya Sopan)**

|  |  |  |
| --- | --- | --- |
| **Name of Badge** | **Date of Passing** | **Name of the Examiner** |
|  |  |  |
|  |  |  |

**12 (10) of APRO II (Detail of Proficiency Badges earned for Tritiya Sopan)**

|  |  |  |  |
| --- | --- | --- | --- |
| **Group** | **Name of Badge** | **Date of Passing** | **Name of the Examiner** |
| **A.** |  |  |  |
| **B.** |  |  |  |

**13 (3) of APRO II (Detail of Ambulance Man Badge earned for Rajya Puraskar)**

|  |  |
| --- | --- |
| **Date of Passing** | **Name of the Examiner** |
|  |  |

**13 (8) of APRO II (Detail of Proficiency Badges earned for Rajya Puraskar)**

|  |  |  |
| --- | --- | --- |
| **Name of Badge** | **Date of Passing** | **Name of the Examiner** |
|  |  |  |
|  |  |  |
|  |  |  |

**13 (9) of APRO II (Detail of Proficiency Badges earned for Rajya Puraskar)**

|  |  |  |
| --- | --- | --- |
| **Name of Badge** | **Date of Passing** | **Name of the Examiner** |
|  |  |  |
|  |  |  |

**Details of the work done for Rashtrapati Scout Award**

**14-B (2.a) of APRO II (Details of Camping)**

|  |  |  |
| --- | --- | --- |
| **Camping Place** | **Dates** | **Name of the Leader of the camp** |
| **From**  | **To** |
|  |  |  |  |

**14-B (3.a) of APRO II (Details of Disaster Management Badge)**

|  |  |
| --- | --- |
| **Date of Passing** | **Name of the Examiner** |
|  |  |

**14-B (3.b) of APRO II (Details of Re-pass Ambulance Man Badge)**

|  |  |
| --- | --- |
| **Date of Passing** | **Name of the Examiner** |
|  |  |

**14-B (4) of APRO II (Details of Proficiency Badges earned)**

|  |  |  |
| --- | --- | --- |
| **Name of Badge** | **Date of Passing** | **Name of the Examiner** |
|  |  |  |
|  |  |  |

**14-B (5) of APRO II (Details of Sustained Community Development Project)**

|  |  |  |
| --- | --- | --- |
| **Name of the Project undertaken** | **Date** | **Service Hrs.** |
| **From** | **To** |
|  |  |  |  |
|  |  |  |  |

**14-B (6) of APRO II (Details of working as Badge Instructor)**

|  |  |  |
| --- | --- | --- |
| **Name of Badge** | **Name of Group** | **Date** |
|  |  | **From** | **To** |
|  |  |

Note: A copy of appointment letter from Group Leader/ADC/DOC and list of Scouts who earned the Proficiency Badge to be produced.

**OR**

**Alternative to the above (Teaching Games)**

|  |  |  |
| --- | --- | --- |
| **Name of Locality** | **Date** | **No of Children** |
| **From** | **To** |
|  |  |  |  |

Note: List of names of Children with their age and Father’s name and a copy of appreciation letter from Parent / Head of Institution to be produced with details.

**14-B (7) Knowledge of Kanderstag Adventure centre of WOSM and prepared log book**

|  |  |
| --- | --- |
| Date of Submission of Log Book |  |

Note: All relevant records, Log Books & Certificates should be produced in the testing camp as and when demanded.

**Signature of Scout**

Date………………………………………..

**Certify that the above information is correct and verified by me.**

**Seal & Signature of Scout Master Seal & Signature of District Org. Commissioner (Scout)**

Date: Date:

***Attended State Level Rashtrapati Scout Award Testing Camp held at.........................................................................................***

***from...........................................to....................................... and recommended to apply for Rashtrapati Scout Award***

***Testing camp to be organized by the National Association.***

**Seal & Signature of State Org. Commissioner (Scout)**

 **Date:**

**Note : 01. All relevant records, Progress Card, Log Books and certificates will be produced at the time of Testing Camp.**

**02. Incomplete / Contradictory information is liable to be rejected.**

**Photocopy of documents to be attached:-**

1. **Date of Birth Certificate.**
2. **Aadhaar Card.**
3. **Scouting Qualification Certificate and Warrant of Unit Leader**
4. **Rajya Puraskar Certificate**