

Avon County Scouts 2009 Adult Training Course Application Form



Personal Details Please write clearly in BLOCK CAPITALS using BLACK INK

Surname	Scout Group
Forename	Scout District
Preferred Name	Scouting Appointment
Title (circle) Mr Miss Mrs Ms Dr	Scouting Experience Helper/Instructor years
Full Address	Leader years
	Date of Birth
	Occupation
Post Code	Religion or Faith
Telephone	Any physical disabilities or special dietary
e-mail address	or other requirements

Courses for All Appointments			Courses for Section Leaders/Supporters		
Course	Date/s	Fee	Course	Date/s	Fee
Module 5 Fundamental Values		£8	Module 11 Administration		£8
Module 7 Valuing Diversity		£8	Module 12 Balanced Programme		£8
Module 8 Skills of Leadership		£8	Module 13 Growing the Movement		£8
Module 9 Working with Adults		£8	Module 14 Young People Today		£8
Module 10 First Aid		£18	Module 15 Challenging Behaviour		£8
			Module 16 Nights Away		£36
			Module 17 Activities Outdoors		£8
			Module 18 Practical Skills		£15
			Module 19 International		£8

Courses for Managers/Supporters (GSL's, ADC's, DC's, CC's, ACC's etc) and Specialist Courses					
Course	Date/s	Fee	Course	Date/s	Fee
Module 20 Administration (Managers)	} Weekend	£36	Module 25 Assessing Learning for Managers OR for Nights Away Advisers (on demand)		£8
Module 21 Growing the Movement (Managers)			Module 25 Assessing Learning for Training Advisers (am or 2 x evenings)*		£15
Module 23 Safety for Managers and Supporters			Module 37 Advising on Adult Appointments		£8
Module 24/26 Managing / Supporting Adults			Modules 20 -26 are also applicable to Administrators (Chairman, Secretary, Treasurer, Executive Members etc)		
Module 22 Section Support (on demand)					

*This Course may be run in Districts, by arrangement with the Training Team, & covers the cost of the "Training Advisers Guide"

Course Fees

I enclose total Course Fees of: £ Please make cheques payable to: **AVON COUNTY SCOUTS**

Date: Signature of Applicant:

Approval

GSL (or DC for District Appointments) Local Training Manager

Signed: Date: Signed: Date:

Completed forms and fees should be sent to:-
Your Local Training Manager who will countersign and forward them to **County Office** BEFORE THE CLOSING DATE

<p>FOR COUNTY OFFICE USE ONLY</p> <p>Total fee paid £.....</p> <p>Acknowledged</p>
