



## 100% Trained Scout Leader Recognition Form

The following is required to qualify for the Central Minnesota Council, BSA.

### Trained Scout Leader Award

**Type of Training**

**Date Completed**

Youth Protection Training \_\_\_\_\_

Before the first Meeting \_\_\_\_\_

First 30 Days \_\_\_\_\_

Position Specific \_\_\_\_\_

Intro to Outdoor Leader Skills (Asst. SM/ SM only) \_\_\_\_\_

*(If you can attach a copy of the Training Card you received or the Certificate you printed if the training was done online, that would be very helpful but is not required)*

Name of Applicant \_\_\_\_\_

Pack Number \_\_\_\_\_

Phone Number \_\_\_\_\_

E-Mail \_\_\_\_\_

Current Pack Position \_\_\_\_\_

**District Approval** \_\_\_\_\_

Return this form to your District Executive or drop by the Central MN Council, BSA office.