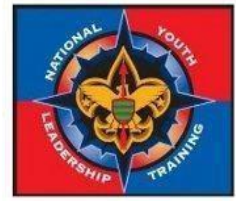




# National Youth Leadership Training Orange County Council BOY SCOUTS OF AMERICA



## A Short Program Overview

National Youth Leadership Training is a council run intensive six-day course designed to teach key team building and leadership skills that can be used in Scouting, school, and other youth group settings. This course for the youth is lead and taught by youth from prior years' courses under the supervision of adult Scoutmasters.

### A Month in the Life of a Unit

The NYLT Course models one month of activity for a typical Scouting unit

- The first three full days of course represent the planning stages
  - Leadership council meetings
  - Unit meetings
  - Planning for larger event
- Participants use the full range of BSA resources for planning and conducting meetings that are interesting, lively, and relevant
- Skills and games that they can use when they return to their home units
- Participants put their preparations to the test with an outpost camp symbolizing the big event that culminates a typical unit's activity cycle program

### Stages of Team Development

Participants find themselves going through the four stages of team development.

- Forming
- Storming
- Norming
- Performing

Youth learn and practice how each stage of team development is paired with a style of leading and a style of teach that works best with the stage.

### Toolbox of leadership Skills

Presentations are designed to provide a toolbox of effective leadership skills resourced from names like Stephen Covey "*The Seven Habits of Highly Effective People*" and Kenneth Blanchard "*One Minute Manager*®" series.

- Vision-Goals-Panning
- SMART Goals
- Planning and Problem-Solving Tool
- Assessment Tool
- Teaching EDGE
- Stages of Team Development
- Leading Edge
- Conflict Resolution Tool
- Making Ethical Decisions
- Communication
- Valuing People

### Staffing NYLT

Youth who demonstrate excellence in leadership and scouting values are invited to return to staff the following years' courses where they can fine tune their leading and teaching skills.

**2024 Course: November 9-11 & 15-17, 2024 At Oso Lake Scout Camp**

Course Director: Rafael Garcia • 2024 Fall Course Director • [ocbsanyltd@gmail.com](mailto:ocbsanyltd@gmail.com)



# National Youth Leadership Training Participant Application Instructions Course

Dates: November 9-11 & 15-17, 2024 at Oso Lake  
Scout Camp



Participants MUST attend the Mandatory Pre-Course Orientation on October 26, 2024 (This is where course begins!) Location: Brea Lions Scout Center @ 9 AM

Participants **MUST** meet the following requirements:

- Be present the entire week of course, including the Mandatory Pre-Course Orientation • Must be a registered member of a Scouting unit.
- Must have a current BSA Health and Medical Record form parts A, B, and C.
- Scouts BSA members (male and female) must be at least 13. They must have completed Introduction to Leadership Skills for Troops.
- Venturers and Sea Scouts (male and female) must be at least 14, or 13 and have completed eighth grade, and fall within the maximum age allowance for their program. They must have completed Introduction to Leadership Skills for Crews or Ships. It is recommended that they have had at least one year of camping experience. While NYLT is not an outdoor skills course, it is important that each participant have basic camping and outdoor cooking experience.
- Have a unit leader recommendation.

## Application Process:

1. Complete all participant application forms for NYLT 2024. The forms are fill-in ready. No spots will be held for incomplete paperwork. Wait list priority is based on a first come first received completed paperwork. a.

Acceptance criteria:

- i. The Participant Application is complete and signed
- ii. Above requirements met and verified by NYLT Registrar
- iii. Code of Conduct is signed by the Scout and parent (unless the Scout is over 18).
- iv. Medical form A and B submitted with application, and Medical form C is due Prior to Oct. 26

1. Include a copy of both sides of your health insurance card
2. Additional medication permission form, if your child takes prescription medication.

- v. Please mail ALL completed paperwork to:

2024 FALL NYLT OCBSA, attn: Quynh-Thi Vidal; 2465 Elden Ave Apt D, Costa Mesa, CA 92627

**FORMS CANNOT  
BE EMAILED**

2. Pay the **\$395** course fee for the course through Black Pug.
  - a. If you are applying for a scholarship or troop payment, please contact the Staff Adviser Peter Jensen at [peter.jensen@scouting.org](mailto:peter.jensen@scouting.org).
  - b. **PAYMENT** prior to submitting completed forms does not guarantee your spot.
3. Once the above steps are done and approved, you will receive a Welcome Letter with additional information.

If participant is absent, without prior approval from the Course Director, from the Mandatory Pre-Course Orientation on Oct 26, 2024; their application will be withdrawn, and no refund will be issued. Applicants whose medical form C is not submitted by Oct 26, will be endangered of losing their spot and placed on the waitlist.

**Orange County Council – Boy Scouts of America**  
**National Youth Leadership Training – Participant Application**  
**Course Dates: November 9-11 & 15-17, 2024** Course  
Location: Oso Lake Scout Camp

For more detailed information, please go online to [nylt.ocbsa.org](http://nylt.ocbsa.org)  
Or contact the Course Director Rafael Garcia at [ocbsanyltd@gmail.com](mailto:ocbsanyltd@gmail.com)

**National Youth Leadership Training Participant Application**

**Participant Information:**

Last: \_\_\_\_\_ First: \_\_\_\_\_ MI: \_\_\_\_\_ BSA Membership ID# \_\_\_\_\_

Preferred Name: \_\_\_\_\_ (for name badges) Gender: Male Female

**Boy Scouts:**

Rank: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
*(Must be 1st Class before October 26, 2024)* *(Must be 13 before October 26, 2024)*

Attended and completed a Week-long Summer Camp? Where: \_\_\_\_\_

**Venturing/Sea Scouts/Explorers:**

Date of Birth: \_\_\_\_\_ Latest YPT Date of completion: \_\_\_\_\_  
*(Must be 14 by October 26, 2024)* *(If 18 before October 26, 2024)* Need copy of Certificate w/ this application

How did you hear about Orange County Council NYLT? \_\_\_\_\_

**Parent Information:**

Parent 1 / Guardian's Name: \_\_\_\_\_ Email: \_\_\_\_\_

Home Phone # \_\_\_\_\_ Cell # \_\_\_\_\_ Work # \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Parent 2 Name: \_\_\_\_\_ Email: \_\_\_\_\_

Home Phone # \_\_\_\_\_ Cell # \_\_\_\_\_ Work # \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**Unit Leader:**

Recommendation is required for participant to attend NYLT. Please fill in ALL the information below:

Present Unit Position: \_\_\_\_\_ Unit Type: Troop, Crew, Ship Unit #: \_\_\_\_\_

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

Unit Leader Phone #: \_\_\_\_\_ Email: \_\_\_\_\_ **By**

**Signing this, you are confirming that this participant meets the requirements to attend NYLT.**

Unit Leader Name: \_\_\_\_\_ Signature: \_\_\_\_\_

## PARENT / GUARDIAN REQUEST FOR MEDICATION (If Needed)

Scout Name: _____	Patrol: <i>(Determined by NYLT Staff)</i>
Date of Birth: _____	

I request that medication be administered to my son / daughter in accordance with the written prescription on the medication container.

Diagnosis / Reason for Medication:

\_\_\_\_\_

Medication / Dose:

\_\_\_\_\_

Route (Oral, Topical, etc.):

\_\_\_\_\_

Possible Reactions:

\_\_\_\_\_

Instructions for Emergency Care: (please attach additional page)

\_\_\_\_\_

**PARENT / GUARDIAN PRINTED NAME    PARENT / GUARDIAN SIGNATURE    DATE:**

\_\_\_\_\_

**HOME PHONE #**

\_\_\_\_\_

**WORK PHONE #**

\_\_\_\_\_

**CELL PHONE #**

## PERMISSION TO CARRY MEDICATION (If Needed)

Inhaler / Medication:

\_\_\_\_\_

My son / daughter has been instructed in the proper use of their inhaler / medication. Their well-being is in jeopardy unless the inhaler / medication is carried on his / her person; therefore, I request that he / she be permitted to carry the inhaler / medication.

I permit my son / daughter to carry the above listed inhaler / medication as ordered by his / her physician. I understand that sharing medication with other Scouts will result in disciplinary action. I also understand the NYLT Staff are unable to monitor the frequency or method of usage of inhaler / medication when it is being carried by a Scout.

\_\_\_\_\_

**PARENT / GUARDIAN SIGNATURE**

\_\_\_\_\_

**DATE:**

# OCBSA NYLT CODE OF CONDUCT

All Youth and Adult participants of National Youth Leadership Training (NYLT) are representatives of the community, family, and local Scouting Council. Therefore, all Scouts and their parents are asked to sign this Code of Conduct as a condition for participating. By signing the Code of Conduct, it is understood that serious misconduct or infraction of behavior rules may result in the expulsion of the participant from the NYLT course. Each Scout must be responsible for their behavior, and only when necessary will the procedure be invoked to send a Scout home from the NYLT course.

***ALL SCOUTS ARE EXPECTED TO LIVE BY THE BOY SCOUT OATH AND LAW AT ALL TIMES AND TO USE THEM AS THE FOUNDATION OF THEIR BEHAVIOR.***

**I promise on my honor as a Scout that:**

- I will not participate in cheating, gambling, dishonesty, swearing, fighting, cursing, use profanity, hazing, bullying, sexual misconduct and/or willful disobedience to Youth or Adult NYLT Staff.
- I understand that if I participate in any of the listed negative behaviors the zero tolerance policy will be in effect and I will be expelled from course.
- Possession of any of the following are not allowed for NYLT participants and will not be brought to camp: Any type of laser device, pyrotechnic device (fireworks), personal firearm and/or ammunition, alcohol and/or tobacco products, unapproved medication and/or substances of any kind, inappropriate literature, personal cell phones, electronic gaming devices, personal music or movie players (iPod, MP3 players, CD, DVD players, etc.).
- I will respect the Course equipment, camp and public property and will be personally responsible for its cleanliness and any loss, breakage, or vandalism of said property(s).
- A Scout always respects the rights and property of others. Remember to keep your hands to yourself. The tongue is a vicious weapon, please think before you speak. Remember the Golden Rule - "Do Unto Others as You Would Have Them Do Unto You".

**I PROMISE, ON MY HONOR AS A SCOUT, THAT I WILL DO MY BEST TO LIVE UP TO THE SCOUT OATH AND LAW AND AGREE TO FOLLOW THIS CODE OF CONDUCT.**

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**SCOUT SIGNATURE**

**PRINT NAME**

**DATE**

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**PARENT | GUARDIAN SIGNATURE**

**PRINT NAME**

**DATE**

# OCBSA NYLT PERSONAL EQUIPMENT CHECKLIST

## Clothing

- Scout Socks (5 pair)
- Full Field Uniform
- Appropriate for Registered Program (1-2)  Short-Sleeve Plain Royal Blue T-shirts (5)
- Closed Toed Camp Appropriate Shoes Optimal for Hiking
- Underwear (5)
- Fleece Pullover or Sweatshirt
- Lightweight Jacket
- Raincoat or Poncho
- Work Gloves
- Scouting Appropriate Hat
- Knit Beanie (optional)
- Scout Belt

## Hiking Gear

- Hiking Backpack (If available) Or Duffel Bag w/Shoulder Straps
- Small Day Pack (optional)
- Lightweight Backpack Stove (if you own one)
- Flashlight or Headlamp that uses replaceable batteries
- Ground Cloth or Tarp
- Water bottle will be provided

## Sleeping Gear

- Sleeping bag
- Sleeping roll pad (optional)
- Pillow (optional)

## Personal Mess Kit

- Utensils (knife/fork/spoon)
- Plastic plate and bowl
- Cup

## Toiletry

- Toothbrush
- Toothpaste
- Soap (in a container)
- Shampoo
- Comb/Brush
- Bath Towel
- Washcloth
- Chapstick
- Toilet Paper (1 roll)

## Miscellaneous

- Personal First Aid Kit
- Sunscreen
- Insect Repellent
- Folding Camp Chair w/Back Pocket
- Knife or Multi-Tool
- Pens (3)
- Watch
- Sewing Kit
- Safety Pins (6)
- Flashlight Batteries
- Shoestrings (1 pair)
- Large Trash Bags

## Items Not Allowed on Course:

- Fire Starting Items
- Electronic devices, such as cell phones, mp3 players, laptops, radios, games, etc.,
- No food, snacks, or drinks. No energy drinks.

## *Finally...*

*Everything on this list must be brought to the NYLT Course, except those marked optional or items that will be provided by NYLT.*

*Please label everything with your name*

## Over-The-Counter

### Medication Warning

Unless there is a medical reason to carry over-the-counter medication, we would prefer that the participant NOT carry any. Should they require said medication, they can always get it from the NYLT medic.

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