

2025 National Youth Leadership Training

Northern Lights Council, Scouting America

Dear Youth Leader:

Congratulations on choosing to participate in the Northern Lights Council's National Youth Leadership Training (NYLT). Because of this, we know you want to become a better leader. The Skills of Leadership will be an important part of the course. You will also have a chance to try out many new Scoutcraft skills that you can use in your home unit.

You and other youth leaders from all over our council will be living, camping, and working together as members of a patrol and troop. A fine staff has been recruited for training and is eagerly waiting for your arrival. Because of the special nature of this course, we ask that every participant remain in camp the entire week. The Course Director, Grendaliz Nieves, must approve any exceptions to this at least one week prior to the course. Attendance for the entire session is required to receive a certificate of completion.

Attached are the NYLT Honor Agreement – Parent/Guardian Consent – Unit Leader Recommendation, Personal Resource Questionnaire, and Knowledge of Outdoor Skills forms. We also require a copy of your Annual Health and Medical Record form (parts A, B, and C), dated after July 31, 2024. Complete all of these forms in a neat, legible manner. Send them by email to gnieves1975@gmail.com or bring them to the course.

These forms must be received by the course director by the beginning of the course. Your acceptance to NYLT is contingent on your completing the forms fully and getting them to me by the due date.

Participants may start arriving anytime between 5:00 PM on Sunday, August 3 and 8:00 AM on Monday, August 4. Please note that no dinner is provided on Sunday. On the last day of the course on Friday, August 8, we will be hosting a closing banquet at 12:00 PM where the participant's families are invited. Participants will be able to pack up and depart immediately after lunch.

You will be carrying all your personal gear into the campsites over rugged terrain. Each participant must have his/her own tent. You will not be able to share equipment with other members of your home unit. There will be shower facilities available. Enclosed is a suggested packing list for the course.

We are very excited about this leadership conference. After seeing the quality of the youth leaders who have already signed up and the excellent staff, we are positive this course will be a great experience for everyone!

If you or your parents have any questions, please email the Course Director at gnieves 1975@gmail.com.

Yours in Scouting,





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HONOR AGREEMENT and **PARENT/GUARDIAN CONSENT FORM**

	n my honor as a Scout, that I will conduct myself
according to the Scout Oath and Law throughout my stay at National Youth	
by the staff and will be responsible for my actions. I understand National You and smoke-free. Harassment and abuse will not be tolerated. Violation of the	
criminal charges as deemed fit by the Scout Executive. Should I fail to comp	
will be expelled from National Youth Leadership Training and my parent/gu	
Scout Signature:	Date:
In consideration of the benefits to be derived, and in view of the fact that the organization, membership of which is voluntary, and having full confidence safety and well-being of my son during this conference, I hereby agree to hi leaders of the National Youth Leadership Training and officers, agents, and	e that every precaution will be taken to ensure the s participation and waive all claims against the
The adult leaders of National Youth Leadership Training are accountable for to take responsibility for his/her own safety and to obey the adult leaders' sa	
However, if your child's actions do not adhere to the above Honor Agreeme then the adult leaders will not incur any further liability. They will not allow You will be called to get your child and take him/her from the course in	y your child to endanger either him/herself or others.
In the event I cannot be reached in an emergency, I hereby give permission representative of the Boy Scouts of America to authorize emergency medica order injection(s) for my child. I request that measures be instituted without	al care, hospitalize, secure proper anesthesia, or to
My child herein is in good health, has all required immunizations, and I assu	ume health responsibility for him/her.
By my signature, as parent or guardian, I agree with and will adhere to the s	statements above.
Parent/Guardian Name:	
Parent/Guardian Signature:	Date:
Please list any medical conditions (including dietary needs) we should be av	ware of:
UNIT LEADER RECOMMEN	DATION
(Scoutmaster for Troop; Adult Leader for Venture	Crew or Explorer Post)
I certify that the above-named Scout is at least 13 years of age, a worthy car Leadership Training, and, if a member of a Scouts BSA Troop, at least First	
Unit Leader Name:	
Unit Leader Signature:	Date:



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PERSONAL RESOURCE QUESTIONNAIRE

(Please Print Neatly)

Participant Name:	
Last School Grade Completed:	Years in Scouting:
Rank (if applicable):	Current Position:
List previous leadership positions held and for how long:	:
Scouting Awards Received:	
Provide a fair evaluation of your physical condition:	
What and how much camping experience have you had?	
What training courses have you taken in Scouting?	
State why you want to participate in this experience and	what you expect to gain from it. (At least 3 sentences)

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Participant Name: _____

KNOWLEDGE OF OUTDOOR SKILLS

Directions: For each of the following skills, check (\checkmark) the appropriate boxes to indicate your skill level. Please circle any merit badge name you have earned.

	Need Help	Have Knowledge	Have Taught	МВ
Map Reading				
Compass				Orienteering
Camping				Camping
Low-Impact Camping				
Hiking				Hiking
Safe Swim Defense				Swimming Life Saving
Knife and Ax				
Fire Building				
Cooking				Cooking
Alternative Cooking Methods (e.g., Dutch oven, reflector oven)				
- T. 4				Nature
Nature				Environmental Science
				First Aid
First Aid				Emergency Preparedness
Knots and Lashings				Pioneering