

Participant NYLT Personal Resource Questionnaire (PRQ)

This form is completed by the YOUTH APPLICANT and signed by the unit leader.

Name _____		M	F	Email _____	
Home # _____	Cell # _____	Troop/Crew # _____		District _____	
Current Rank _____	Years in Scouting _____	Age _____	Date of Birth _____		
School _____	Grade 8 Grad? _____	Y	N	ILST/C/S Date _____	
Previous Leadership positions _____					
Camping Experience: <input type="checkbox"/> Weekend Camper <input type="checkbox"/> Summer Camp <input type="checkbox"/> BSA High Adventure Base <input type="checkbox"/> OA					
<input type="checkbox"/> Trail Hiking <input type="checkbox"/> Other _____					
Training Courses: (e.g. Wilderness Survival, etc.) _____					
Why did you choose to participate in this experience and what do you expect to gain from it? _____					

Please briefly tell us about yourself.					

Scout Skills

Place a checkmark in the box that best represents your ability for each skill. Be as honest and objective as possible. "Has Taught" – means the Scout has the skills to competently teach to others. "Could Teach" – means the Scout has knowledge of the skill but not taught. "Limited Knowledge" – means limited or no knowledge of the skill.

Has Taught	Could Teach	Limited Knowledge	Scout Skill		Has Taught	Could Teach	Limited Knowledge	Scout Skill
			Camping					Nature
			Communications					Orienteering
			CPR					Per. Fitness
			Cooking					Pioneering
			Emer. Prepared.					Safe Swim Def.
			Environ. Science					Safety
			Fire Building					Safety Afloat
			First Aid					Swimming
			Hiking					Weather

Code of Conduct: I will uphold the Scout Oath and Law as a member of NYLT Course 2024. I will not bring the following: Inappropriate Clothing, Sheath Knives (Large Blade Knives), Electronics (games and music players), Fireworks or Aerosol Cans, Backpacking Stoves, Liquid or Gas Fuel of Any Kind, Glass Bottles, Alcohol, Inappropriate Printed or Digital Materials, Weapons, Drugs, or un-Scoutly Behavior. I will follow all Youth Protection Guidelines and follow the directions given by the NYLT Staff. I understand that the Course Director has the authority to dismiss me based on his interpretation of my behavior. I am ready to have an amazing experience at NYLT!

Youth Applicant Signature

I certify that this youth applicant is ready to attend NYLT.
Unit Leader Signature