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 # | 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: ☐ Weekend Camper ☐ Summer Camp ☐ BSA High Adventure Base ☐ OA ☐ Trail Hiking ☐ 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 | Could | Limited | Scout Skill | Has | Could | Limited | Scout Skill |
|--------|-------|-----------|------------------|--------|-------|-----------|----------------|
| Taught | Teach | Knowledge | | Taught | Teach | Knowledge | |
| | | | 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 |

<u>Code of Conduct</u>: I will uphold the Scout Oath and Law as a member of NYLT Course 2025. 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