

# Participant NYLT Personal Resource Questionnaire (PRQ)

**This form is completed by the YOUTH APPLICANT and signed by the applicant and his/her 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 Completion 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 the NYLT experience and what do you expect to gain from it? _____					
_____					
_____					
Please briefly tell us about yourself.					
_____					
_____					

### Scout Skills

Place a check mark in the box that best represents your ability for each skill. Be as honest and objective as possible. "Has Taught" means you have exercised the skills to competently teach to others. "Could Teach" means you have sufficient knowledge of the skill but have not yet 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					Pers. Fitness
			Cooking					Pioneering
			Emer. Prepared.					GPS
			Environ. Science					Safety
			Fire Building					Backpacking
			First Aid					Knot Tying
			Hiking					Weather

**Code of Conduct:**

- I will uphold the Scout Oath and Law as a member of NYLT Course 2025.
- I will not bring the following to NYLT: Inappropriate Clothing, Knives, Electronics (games & music players), Fireworks or Aerosol Cans, Backpacking Stoves, Liquid or Gas Fuel of Any Kind, Glass Bottles, Inappropriate Printed or Digital Materials, Weapons, Drugs, Alcohol, and Tobacco or Vaping items.
- I will not engage in un-Scoutly Behavior and will follow all Youth Protection Guidelines and the directions of the NYLT Staff. I understand that the Course Director has the authority to dismiss me based on violating this Code or inappropriate behavior on my part.
- I am ready to have an amazing experience at NYLT with my fellow Scouts!

Youth Applicant Signature

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