



Vietnamese Scout Leaders SR-430 Wood Badge

Personal Resource Questionnaire

Name: _____

I would like to be called: _____

Address: _____

City: _____ State _____ Zip Code _____

Country _____

Phone No. (H) _____ (B) _____ (Cell) _____

E-mail _____ (Fax) _____

Occupation: _____

Date of birth: _____

District: _____ Council name: _____

Current registered position: _____

Years in Scouting:

Adult _____ Years

Youth _____ Years. Highest Rank _____

Adult position(s) held and for how long? Please include HDVN position (s) held and for how long?
[for instance Den Leader for 3 yrs., Scoutmaster for 4 yrs., etc.]

_____	_____
_____	_____
_____	_____
_____	_____

Scouting Award (s) Received:

State what you feel is a fair evaluation of your physical Condition:

List any special needs:

Camping: How much experience have you had and how comfortable are you with it?

Training experiences in Scouting: (you must have completed the basic training and outdoor training for the position in which you are registered) Please include HDVN experiences:

Religious preference: _____

(There will be an interfaith service[s] available. If you have particular religious needs, please include them here or otherwise inform the Course Director)

First Aid Training: (include CPR):
