

Adult Basic Training Information

Name _____ Home Phone _____

Address _____ Wk Phone _____

City/State/Zip _____ Fax _____

District _____ Unit Type _____ Unit # _____ Email _____

Position _____

I have attended the following training classes:

<i>Cub Scout</i>	<i>Date</i>	<i>Boy Scout</i>	<i>Date</i>	<i>Venturing</i>	<i>Date</i>
Fast Start (OLC)	_____	Fast Start (OLC)	_____	Fast Start (OLC)	_____
Youth Protection* (OLC)	_____	Youth Protection* (OLC)	_____	Youth Protection* (OLC)	_____
Leader Specific	_____	Leader Specific	_____	Leader Specific	_____
This is Scouting (OLC)	_____	This is Scouting (OLC)	_____	This is Scouting (OLC)	_____
		Intro to Outdoor Skills	_____		

Supplemental Training Completed

	<i>Date</i>		<i>Date</i>
Basic Adult Leader Outdoor Orientation*	_____	Powder Horn	_____
Outdoor Skills for Webelos Leaders	_____	Troop Committee Challenge (OLC)	_____
Hazardous Weather* (OLC)	_____	The Trainer's EDGE	_____
Climb on Safely*	_____	Wood Badge	_____
Safe Swim Defense*	_____	Climbing/Rappelling*	_____
First Aid*	_____	Safety Afloat*	_____
Wilderness First Aid*	_____	CPR*	_____
Leave No Trace Awareness	_____	Health & Safety Training	_____
Archery Range Officer	_____	Trek Safely (OLC)	_____
BB Gun Range Officer	_____	Swimming & Water Rescue	_____
Aquatics Supervisor	_____	Paddle Craft & Safety	_____
Outdoor Skills Training	_____	Other _____	_____

*Required for Tour Permit
 OLC - Online Learning Center