

TRAINING APPLICATION



Module Nos		Date	
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Title (Mr/Mrs/Ms/Other)		Surname	
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Forename (s)			
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(underline the name you wish to be know by)

Maiden Name		Date of Birth	
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Address			
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	Post Code		
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Telephone Number		E-Mail	
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Occupation			
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Religion/Faith			
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Scout Appointment (Section & Group)			
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District			
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How long as an Adult in Scouting			
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Do you have any Special Dietary Needs?			
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Details of Previous Training			
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Approval – Group Scout Leader	Training Advisor	
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Name		Name	
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Address		Address	
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Post Code		Post Code	
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E-Mail		E-Mail	
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Telephone		Telephone	
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Enclosed course fee	£	Cheques payable to:	
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Signature (DC) _____
 Cornwall County Scouts Council
No acceptance on course without fee

Please send to County Training Secretary
 Mrs. B Jenkins
 8 Kings Avenue
 Falmouth, TR11 2QH
 T: (01326) 311717

FOR OFFICAL USE ONLY

Date Received		Cheque No		Candidate No	
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Module Attending		Course cancelled	
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Cornwall County Scout Council

County Training Manager Peter Carvell

Address: 55 St Stephens Road, Saltash, Cornwall, PL12 4BQ

Home: (01752) 845033 E-Mail: training@cornwallscouts.co.uk

Patron HM The Queen President HRH The Duke of Kent Founder Robert Baden-Powell OM Chief Scout Peter Duncan

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