



# NOTTINGHAMSHIRE COUNTY SCOUTS

## Adult Training Application Form

The information provided will be used for Scouting purposes only and in accordance with the Data Protection Act 1998.

**The closing date for all applications is FOURTEEN DAYS prior to the date of training.**



### Applicant's Details

Surname :  Title : Mr Mrs Miss Ms Dr Prof Rev Capt

First Name(s) :  Known by :

Address :  Date of Birth :

Home Tele :

Alternative Tele :

eMail :

District :

Group :

Post Code :

My Training Adviser is :  Appointment :

### Personal Requirements

e.g. Hearing / Sight / Mobility Impairment / Dyslexia

### Application for Module(s)

Module Ref. Number	Date(s)	Module Ref. Number	Date(s)
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

If a Module 25 Application : I wish to attend as a Manager  Training Adviser  Assessor  Please indicate as appropriate

### Declaration by Applicant

I have checked the date(s) and time(s) of my chosen module(s) and I agree to attend the full module(s)

Signed :  Date :

**Please forward this completed form, together with any required Training Fee, to  
County Training Administrator, 57 Dunstan Crescent, WORKSOP, S80 1AG.  
( or email to [training@notts-scouts.org.uk](mailto:training@notts-scouts.org.uk) )**

**Applications must be received at least 14 days prior to the date of training**

Cheques (post dated to the training date) to be made payable to **NOTTINGHAMSHIRE COUNTY SCOUT COUNCIL**

### For County Training Administrator's Use Only

Application Received :

Fee Received ( if any ) : Cheque No :  £  Dated :