

TROOP 608

CANDIDATE FOR LEADERSHIP POSITION APPLICATION

THIS FORM MUST BE COMPLETED IN FULL, AND SUBMITTED ON TIME,
FOR A SCOUT TO BE CONSIDERED FOR ANY POSITION.

NAME OF SCOUT _____

CURRENT RANK _____ **PATROL** _____

I would like to be considered as a candidate for the following position(s). The term of office for these positions will be August 2003-February 2004. (Check all positions you wish to be considered for.)

- Senior Patrol Leader (*Star & above, must have served as a Patrol Leader for at least 6 months*)
- Assistant Senior Patrol Leader (*Star & above, must have served as a Patrol Leader for at least 6 months*)
- Patrol Leader (*1st Class & above*)
- Assistant Patrol Leader (*2nd Class & above*)
- Scribe (*2nd Class & above*)
- Chief Quartermaster (*1st class & above*)
- Assistant Quartermasters (*2nd Class & above*)
- Historian
- Librarian
- Instructor (*Life & Eagle*)
- OA Troop Representative (*Must be an OA Member*)
- Other: _____

I understand that I must meet the following criteria to be considered for the position(s):

- * **Demonstrate Scout Spirit**, including wearing the uniform correctly when required
 - * **Agree to attend, in full, the Troop Junior Leader Training**, scheduled for September 6-7, 2003.
 - * **Agree to attend monthly Patrol Leaders Council (PLC) Meetings**, held on the first Monday of each month from 6:00-6:45 PM, as required during my term of office
 - * **Agree to attend all troop meetings and campouts during the 6-month period I am in office.**
- I understand that my obligation to Troop 608 during this 6-month period comes first and I have arranged my schedule so that I will be present for all required troop activities.
- * **Meet the minimum requirements for the position**, listed next to each position
 - * **Be approved by your parent(s) by showing them this form and having them sign it.**
 - * **Be approved by your Patrol Advisor and the Scoutmaster.**

I agree to the above criteria. I wish to be considered for the position(s) indicated. I understand that failure to meet the above criteria may result in the loss of my leadership position.

Signed _____ Date _____

TO PARENTS: Your son has expressed a desire to be considered for the above position(s) for a term of 6 months. He has agreed to the criteria above. Please be familiar with these criteria and give your approval for your son to be considered for the above position(s).

I approve of my son's application to be considered for the above position(s). If he is chosen, I will do my best to support him as he carries out the responsibilities for his position.

Parent Signature: _____ Date: _____

PATROL ADVISOR APPROVAL: I approve this Scout to apply for the above listed leadership positions.

Patrol Advisor Signature: _____ Date: _____

Comments:

SCOUT: SUBMIT SIGNED FORM TO MR.WERRE NO LATER THAN AUGUST 18, 2003
ELECTIONS: AUGUST 25, 2003
