



THE BHARAT SCOUTS AND GUIDES

STATE HEADQUARTERS

Registration Form for State Level Testing Camp for President Guide Certificate



(To be filled by the candidate in her own handwriting in capital letters. Overwriting/use of fluid will not be accepted)

District _____

1. Name of the Guide _____

2. (A) Father's Name _____

(B) Mother's Name _____

3. Date of Birth (DD/MMM/YYYY) _____ Age _____
 (Supported by Admit Card/Mark Sheet/Certificate of class X/Secondary Board Examination, attested copy of certificate should be attached)

4. Home/Present Address _____
 P.O. _____ District _____ State _____

E-mail ID _____

Aadhaar No. _____
 (Attach photocopy of Aadhaar Card)

5. BSG UID No. _____

6. Name and address of Unit _____

_____ District _____

Charter No. _____ Date of Issue _____ Date of Validity _____

Signature of Guide Captain

Signature of Guide

7. Name of the Guide Captain _____

Guiding Qualification: _____ Certificate No: _____ Date: _____

Warrant No. _____ Date of Issue _____ Date of Validity _____

(Attach photocopy of Certificate/Parchment and Warrant of GC)

Certified that the information given above is correct as per the District / State records

Seal & Signature of District Secretary

Date: _____

Seal & Signature of DOC (Guide)

Date: _____

NB: Information Sheet attached.

For State Headquarters use

Date of Receipt of Application at SHQ _____ Remarks _____

Checked by (Name & Designation) _____ Signature _____

Signature of State Secretary

Signature of SOC (Guide)

She is qualified in the State Level Testing Camp for President Guide Certificate held at _____ from _____ to _____

The form is recommended for the National Level Examination for President Guide Certificate.

SIGNATURE of SOC(G)

For National Headquarters use

Date of Receipt of Application at RHQ _____ Remarks _____

Checked by (Name & Designation) _____ Signature _____

RHQ Enrolment No

Signature of ROC/Assistant Director

Date of Birth Certificate

This is to certify that Miss _____

D/o _____ is a student of _____

_____ School/College studying in class _____

in the year _____ Her date of Birth is _____ (in

figures) _____ (in words)

as per her School/College record.

Date.....

(Office Seal)

**Signature
Head of the Institution**

**THE BHARAT SCOUTS AND GUIDES DISTRICT
INFORMATION SHEET FOR GUIDE**

(to be attached with Registration Form)

NB: To be filled by the Candidate in her own handwriting in Capital letters. Overwriting / use of fluid will not be accepted

1. Name of the District:
2. Name of the Guide:
3. (A) Father's Name:
(B) Mother's Name:
4. Date of Birth (DD/MM/YYYY):
5. Date of (I) Joining the Company.....
(II) Completion of Pravesh.....
(III) Investiture.....
(IV) Completion of Pratham Sopan.....
(V) Completion of Dwitiya Sopan.....
(VI) Completion of Tritiya Sopan.....
(VII) Completion of Rajya Puraskar.....

Rajya Puraskar Testing Camp held at from.....
to Certificate No Date of Issue.....

15 (x) of APRO III (Detail of Proficiency Badges earned for Dwitiya Sopan)

Name of Badge	Date of Passing	Name of the Examiner

16 (10) of APRO III (Details of Proficiency Badges earned for Tritiya Sopan)

Group	Name of Badge	Date of Passing	Name of the Examiner
A			
B			

17 (viii) of APRO III (Details of Proficiency Badges earned for Rajya Puraskar)

Name of Badge	Date of Passing	Name of the Examiner

17 (ix) of APRO III (Details of Proficiency Badges earned for Rajya Puraskar)

Name of Badge	Date of Passing	Name of the Examiner

Details of the work done for President Guide Badge

18 (B) (ii) a of APRO III (Detail of Camping)

Camping Place	Dates		Name of the Leader of the camp
	From	To	

18 (B) (iii) a of APRO III (Detail of Disaster Management Badge)

Date of Passing	Name of the Examiner

18 (B) (iii) b of APRO III (Detail of Ambulance Badge)

Date of Re- Pass	Name of the Examiner

18 (B) (iv) of APRO III (Detail of Proficiency Badge earned for President Guide Award)

Name of Badge	Date of Passing	Name of the Examiner

18-B (v) of APRO III (Details of Sustained Community Development Project)

Name of the Project undertaken	Dates		Service Hrs.
	From	to	
1.			
2.			

18-B (vi) of APRO III (Details of Teaching Games)

Name of Locality	Date		No of Children
	From	To	

Note: List of names of Children with their age and Father's name and a copy of the appreciation letter from Parent / Head of the Institution to be produced with details.

OR

Knowledge of Interior Decoration and Fancy Cooking

Date of Submission of Log Book in COH	
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18-B (vii) of APRO III (Details of World Centres of WAGGGS)

Date of Submission of Log Book in COH	
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Note: All relevant records, Log Books & Certificates should be produced in the testing camp as and when demanded.

Date:

Signature of Guide

Certify that the above information is correct and verified by me.

Signature of Guide Captain

Date:

Seal & Sign. of District Org. Commissioner(G)

Date:

Information Sheet Checked & Verified

Seal & Signature of SOC(Guide)

Date:

Note: 01. All relevant records, Progress Card, Log Books and certificates are to be produced at the time of State Level Testing Camp for President Guide Certificate

02. Incomplete / Contradictory information is liable to be rejected.

Photocopy of documents to be attached:-

1. Date of Birth Certificate
2. Aadhaar Card