



# THE BHARAT SCOUTS AND GUIDES

STATE HEADQUARTERS

## Registration Form for State Level Testing Camp for President Ranger 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 Ranger \_\_\_\_\_

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 Ranger Leader**

**Signature of Ranger**

7. Name of the Ranger Leader \_\_\_\_\_

Guiding Qualification \_\_\_\_\_ Certificate/Parchment No. \_\_\_\_\_

(Attach photocopy of Certificate/Parchment)

Warrant No. \_\_\_\_\_ Date of Issue \_\_\_\_\_ Date of validity \_\_\_\_\_

(Attach photocopy of Warrant of RL)

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 Ranger Certificate held at \_\_\_\_\_ from \_\_\_\_\_ to \_\_\_\_\_

The form is recommended for the National Level Examination for President Ranger 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 RANGER

(to be attached with Registration Form)

**NB: Overwriting / use of fluid will not be accepted, fill-up carefully and in Capital Letters only).**

1. Name of the District : .....
2. Name of Ranger : .....
3. (A) Father's Name : .....
- (B) Mother's Name : .....
4. Date of Birth (DD/MM/YYYY) : .....
5. Date of (i) Joining the Team .....
- (ii) Completion of Pravesh.....
- (iii) Investiture .....
- (iv) Completion of Nipun .....
- (v) Completion of Rajya Puraskar.....

Rajya Puraskar Testing Camp held at.....from.....to.....

Certificate No. ....Date of Issue.....

### Details of Proficiency badges earned for Rajya Puraskar Ranger.

**20.14 (a) of APRO III (Details of Disaster Preparedness Badge)**

| Date of Passing | Name of the Examiner |
|-----------------|----------------------|
|                 |                      |

**20.14 (b) of APRO III (Details of Proficiency Badge)**

| Name of Badge | Date of Passing | Name of the Examiner |
|---------------|-----------------|----------------------|
|               |                 |                      |

**20. 15 of APRO III (Details of Ambulance Badge)**

| Date of Passing | Name of the Examiner |
|-----------------|----------------------|
|                 |                      |

### Details of the work done for President Ranger Badge

**21. (B) 1 of APRO III (Details of Subject on Current World Affairs / WAGGGS/ National Affairs)**

| Subject | Report Submitted on | Date of Approval of Team Council |
|---------|---------------------|----------------------------------|
|         |                     |                                  |

**21. (B) 2 of APRO III (Details of C.D. Project)**

| Name of the C.D. Project | Date of Commencing | Date of Completion | Date of Approval of Team Council | Report Submitted to Team Council on |
|--------------------------|--------------------|--------------------|----------------------------------|-------------------------------------|
|                          |                    |                    |                                  |                                     |

**21. (B). 3 of APRO III (Details of Service rendered at District/State/National Event)**

| Name of the Event | Date and Venue | District/State/National | Certificate No & Date (attach photocopy of Certificate) |
|-------------------|----------------|-------------------------|---|
|                   |                |                         |   |

**21. (B).4 of APRO III (Details of Community Service Project)**

| Name of the Project undertaken | Date |    | Service Hrs. | Report Submitted on |
|--------------------------------|------|----|--------------|---------------------|
|                                | From | To |              |                     |
|                                |      |    |              |                     |

**21. (B).5 of APRO III (Details of Adventure Programme / Trekking Programme /International Event/International Adventure Programme.**

| Subject | Date |    | Report Submitted on or Certificate No. and Date (for International Event or International Adventure Programme) |
|---------|------|----|--|
|         | From | To |  |
|         |      |    |  |

**21.(B).7 of APRO III (Develop International Friendship/Messenger of Peace /Geet Manch)**

| Subject | Date |    | Date of Submission of Report or Dates of Uploading Projects in case of MOP |
|---------|------|----|--|
|         | From | To |  |
|         |      |    |  |

**21. (B). 8 (a) of APRO III(Details of Disaster Management Proficiency Badge)**

| Date of Passing | Name of the Examiner |
|-----------------|----------------------|
|                 |                      |

**21. (B).8 (b) of APRO III (Details of other Proficiency Badge)**

| Name of the Badge | Date of Passing | Name of the Examiner |
|-------------------|-----------------|----------------------|
|                   |                 |                      |

Date :.....

Signature of Ranger

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

Signature of Ranger Leader  
Date:

Signature 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 Ranger Certificate.**

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

**Photocopy of documents to be attached:-**

- 1. Date of Birth Certificate.**
- 2. Aadhaar Card.**