



Please print in BLOCK CAPITALS

**CANDIDATE:**

Full Names & Surname:																										
SD Number:							Date of Birth:	D	D	M	M	Y	Y	Y	Y											
Home No:									Cell No:																	
Email Address:																										
Troop:																										
District:																										
Region:																										
Contact Parent Names:																										
Home No:									Cell No:																	

**FIRST CLASS:**

Adventure theme completed	D	D	M	M	Y	Y
Safety awareness theme completed	D	D	M	M	Y	Y
Living outdoors theme completed	D	D	M	M	Y	Y
Service theme completed	D	D	M	M	Y	Y
ScOUT skills theme completed	D	D	M	M	Y	Y
Personal development theme completed	D	D	M	M	Y	Y

**PLANNING and REGISTRATION for SPRINGBOK AWARD**

All Scouts commencing on any Springbok theme badges are strongly advised to prepare an initial plan for completing ALL requirements for their Springbok Advancement. It is recognised that dates and some ideas may change, but without a plan the chances of achieving Springbok are reduced.

The planning and registration comprises of TWO PARTS, which can be submitted on the same form, but in two stages.

**Part A: to be agreed with the Troop Scouter is strongly recommended**

**Part B: to be approved by the RTC Scout Programme is mandatory**

**PART A – to be completed with the TROOP SCOUTER**

1. ADVENTURE	Mapwork	Date:	D	D	M	M	Y	Y
2. SAFETY AWARENESS	Interest Badge	Date:	D	D	M	M	Y	Y
	Outing / Guest / Charge	Date:	D	D	M	M	Y	Y
3. LIVING OUTDOORS	Camp & Oral Discussion	Date:	D	D	M	M	Y	Y
	Evaluators Signature:							
4. SERVICE	Movement	Date:	D	D	M	M	Y	Y
5. SCOUT SKILLS	First Aid	Date:	D	D	M	M	Y	Y

6. PERSONAL DEVELOPMENT	COH Meetings	Date:	D	D	M	M	Y	Y
	COH Leadership position	Date:	D	D	M	M	Y	Y
	Troop succession planning	Date:	D	D	M	M	Y	Y
	Scouts Own	Date:	D	D	M	M	Y	Y
	Respect for Others	Date:	D	D	M	M	Y	Y
	Two Outdoor Obstacles	Date:	D	D	M	M	Y	Y

**SPRINGBOK AWARD PART B**

**Part B of this application form must be approved by the RTC Scout Programme prior to starting the corresponding requirements.**

Detailed proposals & plans for all three of these requirements must be attached to this application form.

1. ADVENTURE	Evaluator	
Expedition Proposal:	Location	
	Proposed Date:	D D M M Y Y

2. SERVICE	Evaluator	
Community Service Proposal:	Location	
	Proposed Date:	D D M M Y Y

3. SCOUT SKILLS	Evaluator	
Major Project Proposal:	Location	
	Proposed Date:	D D M M Y Y

Scout's Name		Signature:	
Date:	D D M M Y Y		
Troop Scouter Name		Signature:	
Date:	D D M M Y Y		
DC Name		Signature:	
Date:	D D M M Y Y		
RTC Scout Programme		Signature:	
Date:	D D M M Y Y		

RTC Scout Programme to send a copy of the completed registration form to the Chair: National Scout Programme.