



BOY SCOUTS OF AMERICA - ADULT PERSONAL TRAINING LOG



Name: _____

Date Started: _____

Scout Leader Positions Held:

Date:	<input type="text"/>	Unit No.:	<input type="text"/>	Position:	<input type="text"/>	District/Council:	<input type="text"/>
Date:	<input type="text"/>	Unit No.:	<input type="text"/>	Position:	<input type="text"/>	District/Council:	<input type="text"/>
Date:	<input type="text"/>	Unit No.:	<input type="text"/>	Position:	<input type="text"/>	District/Council:	<input type="text"/>
Date:	<input type="text"/>	Unit No.:	<input type="text"/>	Position:	<input type="text"/>	District/Council:	<input type="text"/>
Date:	<input type="text"/>	Unit No.:	<input type="text"/>	Position:	<input type="text"/>	District/Council:	<input type="text"/>

There are spaces on this form to describe personal goals; these may change during the course of your Scouting "career", and it may be helpful for you to document them as you discover that you actually have goals. Adding personal reflection on trainings or awards may provide insight at later dates.

General Scout Trainings

Youth Protection Dates:

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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*This Is Scouting! (Date, Location): _____

Voyager Canoe Training (Date, Location): Part 1: _____ Part 2: _____

Chartered Org. Representative (Date, Location): _____

Popcorn Training (Date, Location): _____

Safe Swim Defense (Dates) (repeat every 2 yrs):

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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Safety Afloat (Dates) (repeat every 2 yrs):

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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Health & Safety (Date, Location): _____

Lines marked with * are required in order to wear the Trained Patch for each area or position. Write notes, ideas with each training completed.

Cub Scout Trainings:

Personal Goals: _____

*Cub Scout Fast Start: _____ *Pack Committee Challenge/Trng: _____

*Tiger Den Ldr Specifics (Date, Location): _____

*Cub Den Ldr Specifics (Date, Location): _____

*Webelo Den Ldr Specifics (Date, Location): _____

*Cub Master Specifics (Date, Location): _____

OWL (Outdoor Webelo Leader (Date, Location): _____

Baloo (Basic Adult Leader Outdoor Orientation) (Date, Location): _____

Other (Name, Date, Location): _____

Boy Scout Trainings:

Personal Goals: _____

*Boy Scout Fast Start: _____ *Troop Committee Challenge/Trng: _____

*Scoutmaster Asst Scoutmaster Specifics (Date, Location): _____

Merit Badge Counselor (Date, Location): _____

*Outdoor Leader Skills (Date, Location): _____

Webelo to Scout Transition (Date, Location): _____

Climb On Safely (Date, Location): _____

Trek Safely (Date, Location): _____

Venture Leader Trainings

Personal Goals: _____

*Venture Leader Fast Start: _____

*Venture Leader Specifics: _____

Other (Name, Date, Location): _____

Advanced Leader Trainings:**Personal Goals:** _____

Wood Badge (Course No., Dates, Locations): _____

Date completed: _____ Date beads presented: _____

Marlinspike (Date, Location): _____

Advanced Marlinspike (Date, Location): _____

Powderhorn (Date, Location): _____

Other: _____

Other: _____

District Position Trainings:**Personal Goals:** _____

*Commissioner Basic Training (Dates, Location): _____

Advanced Commissioner Training (Date, Location): _____

Unit Commissioner Training (Date, Location): _____

*District Committee Workshop (Date, Location): _____

District Training Committee (Date, Location): _____

Cub Scout Roundtable Commissioner (Date, Location): _____

Boy Scout Roundtable Commissioner (Date, Location): _____

School Night Training (Date, Location): _____

Other: _____

Other: _____

University Of Scouting - Special Courses or Degrees

Class, Date, Location: _____

Class, Date, Location: _____

Class, Date, Location: _____

Class, Date, Location: _____

Class, Date, Location: _____

Adult Awards, Recognitions

OA - Arrowman (Date, Ordeal Location): _____ Brotherhood: _____ Vigil Honor: _____

Firecrafter (Ritual Date, Location): _____ Minisino (Test Date, Location): _____

Cubmaster Of The Year (Date, District, Council): _____

Scoutmaster Of The Year (Date, District, Council): _____

Scouter Of The Year (Date, District, Council): _____

Committee Member Of The Year (Date, District, Council): _____

Commissioner Of The Year (Date, District, Council): _____

District Award Of Merit (Date, District, Council): _____

Other: _____

Other: _____

Other: _____

Council/National Events Attended:

Name, Date, Location: _____

Name, Date, Location: _____

Name, Date, Location: _____

Name, Date, Location: _____

Name, Date, Location: _____

Name, Date, Location: _____

Name, Date, Location: _____

Name, Date, Location: _____

Name, Date, Location: _____

Name, Date, Location: _____