**Blacktoft Beacon Scouts**

Thank you for your interest in the role of District Youth Commissioner.

Please complete the form below to apply for the role.

**District Youth Commissioner – Application Form**

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| Name: | D.O.B: | |
| Home Address: | Age: | |
| Contact  Number: | |
| Postcode: | Membership Number:  (if known) | |
| Email Address: | | |
| Current Scouting Appointments Held:  Current Group/District/County:  Previous Scouting Appointments: | | |
| **Personal Profile:**  Please give details of any Scouting or professional experience and skills you have, relevant to the role. | |

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| **Youth Shaped Scouting:**  Please explain why you think Youth Shaped Scouting is important and what you could contribute to the role. |
| **Your Scouting:**  Tell us what you love about Scouting, the influence it has had on you and what you believe needs changing. |

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| **And finally….**  If you were successful in the role, what area(s) of youth shaped scouting in Blacktoft Beacon would you like to be involved with, and what support you think you would need? |

**Please return to:**

**Rachael Macadam**

**17 Astral Close**

**Hessle**

**HU13 9DE**

[**depdc@blacktoftbeacon-scouts.org.uk**](mailto:depdc@blacktoftbeacon-scouts.org.uk)

**The deadline for applications is** **30th November 2017.**