Bushwalking: Level 3 Weekend walks

Applicant Details:

Name:	Date of birth:
Scout Formation and Group:	Member number:
Email address:	Phone contact:

item	Skill	Date of demonstration	verifier initials
Age range	Be 18 years of age or over		IIIItidis
Pre-requ	The candidate meets all of the requirements for Bushwalking Level 2 – Weekend Walks	Date attained	
	The candidate meets all of the requirements for the following Bushwalking Endorsement	Date attained	
Policy	The candidate has a detailed knowledge of the Scouts NSW Adventurous Activity Policy.		
Rules	The candidate has a detailed knowledge of the Scouts NSW Adventurous Activity Rules relevant to the skill being assessed.		
Environment	Demonstrate the implementation of minimal impact practises relevant to this activity.		
Management	Prepare risk assessments relevant to the skill for two separate activities in two different locations including at least one endorsed skill. 1.		
	2.		
	Under the direct supervision of 2 level 3's, plan and conduct two separate activities in two different locations involving novices. At least one of these activities must involve an endorsed skill.		
	Comments:		
Training	Demonstrated capacity to deliver subject specific, small group instruction in a Scouting environment.		
First Aid	Hold current 'Apply first aid' (HLTFA301B) or equivalent. Type: Number:	Expiry date	Certified copy

Scouts NSW APPLICATION FOR RECOGNITION OF ACTIVITY SKILLS

A4 Form, Version 3. 1 1Jan12

item	Skill	Date of demonstration	verifier initials
Log Book	Detailed logbook sighted, showing relevant skills and include trip reports for the two activities above.		

Candidate's Name:				
I verify that all documentation and evidence given to support the above is true and correct.				
Candidate signature:				
I verify that the participant has demonstrated or	, , , , , , , , , , , , , , , , , , , ,			
provided evidence to demonstrate the above	provided evidence to demonstrate the above			
requirements. Level 3 verifyer:	requirements. Level 3 verifyer:			
name Date:	name Date:			
signaturo	cignatura			
signature:	signature:			

Approval and Administration:

Regional Commissioner Activities Approval					
	Signature	I	Date:		
Date recorded in Region Activity Meeting notes		Date MIS updated			
Signed copy returned to L3/candidate					