

SSA Role Application

Position applying for:			_
Personal Details of Appl	icant		
Surname:			Male Female
First Names:			
ID Number:		Date of Birth:	 Day/ Month / Year
Address:			
		Code:	
Telephone Cell:		Telephone (H):	
Telephone (W):	Email	:	
Occupation:	Employer: _		
Current position in Scoutin	g:		
Scout Group/Team:			
Scouting or work related e	xperience relevant to the r	equirements of this	position:
Scout Training Completed	(please tick the appropriate	e boxes):	
Permit	Warrant Cub	Warrant Scout	
Warrant Rover	Warrant Comm	Woodbadge Cub	
Woodbadge Scout	Woodbadge GS/ Comm/F	Rover	
ALT Training	LT Training		
Other:			

E-mail: info@scouting.org.za Website: www.scouting.org.za Tel: 0860 SCOUTS



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What do you believe make	s you the right perso	to fulfill the role:
What do you see as the ma	ajor objectives for the	person in the role in the next 2-3 years?
Please attach a one page S	scout CV to this applic	ation
Reference 1:	Cell:	email:
Reference 2:	Cell:	email:
Signed		Date: Day Month Year

All applications will be acknowledged. If you have not received acknowledgement it means that the application was not received by the intended recipient.