



**Please complete this form when:**

1. Existing member wishes to change a role or take on a new role within SSA
2. Any new member is taking on a role within SSA

**DETAILS OF APPLICANT AND CURRENT ROLE:**

Full Names & Surname:

SSA ID: S S A -

Current Role in SSA:  
(if applicable)

Den/Pack/Troop/Crew/Team:

District/Region/National:

Scouting or work-related experience relevant to the requirements of this role applied for:

**Please attach a comprehensive Scout CV to this application – Template on the National website.**

Applicants applying for positions in the Region, National or on the Board are please to supply the names, email addresses and cell numbers of 2 x referees who we may contact if need be.

|                                    |                                    |
|------------------------------------|------------------------------------|
| Name <input type="text"/>          | Name <input type="text"/>          |
| Email address <input type="text"/> | Email address <input type="text"/> |
| Cell number <input type="text"/>   | Cell number <input type="text"/>   |

**ROLE APPLIED FOR:**

Role Applied for:

Den/Pack/Troop/Crew/Team:

District/Region/National:

**ACCEPTANCE OF ROLE DESCRIPTION:**

**Role Description accepted by Applicant:**

**YES**

**NO**

|   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|
| D | D | M | M | Y | Y | Y | Y |
|---|---|---|---|---|---|---|---|

Date

Signature of Applicant

If "No" kindly insert changes in block provided below

**DECLARATION:**

As a future member of SCOUTS South Africa and in signing this application form, the following will happen: Please tick each line item.

- I agree to work within the [Organisational Rules and all Policies](#) of SCOUTS South Africa and its Member Code of Conduct.
- I have undergone a Police / Criminal Clearance and understand that SCOUTS South Africa has the right to request the same at any time thereafter.
- I consent to SCOUTS South Africa processing any personal information I supply to them for administrating and maintaining my membership of SCOUTS South Africa, within the official Member and Communication Management Systems. I confirm that my personal details and supporting documents as provided with this application may be uploaded to and managed on the Member Management System and that my contact information may be uploaded and used within the internal communication platform(s).

|   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|
| D | D | M | M | Y | Y | Y | Y |
|---|---|---|---|---|---|---|---|

Date

Signature of Applicant

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

- Please indicate:  I will print out my own Warrant Certificate.
- Please can National/Regional print my Warrant Certificate as I would like it presented to me.

**FOR OFFICE USE: CONFIRMATION:**

Date Application Received 

|   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|
| D | D | M | M | Y | Y | Y | Y |
|---|---|---|---|---|---|---|---|

Does the applicant meet the published job description and criteria? Yes  No

**INTERVIEW PROCESS:**

**INTERVIEW PANEL MEMBERS APPOINTED:**

| Full names | Warranted Role |
|------------|----------------|
|            |                |
|            |                |
|            |                |
|            |                |

**INTERVIEW NOTES:**

**INTERVIEW RESULT / RECOMMENDED FOR APPOINTMENT**

Date: 

|   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|
| D | D | M | M | Y | Y | Y | Y |
|---|---|---|---|---|---|---|---|

Recommended: Yes  No

Name of Chair of Panel

Signature

**RECOMMENDED APPOINTMENT ENDORSED BY NEXT-IN-LINE SCOUTER:**

Date: 

|   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|
| D | D | M | M | Y | Y | Y | Y |
|---|---|---|---|---|---|---|---|

Recommended: Yes  No

Name of next-in-line Scouter

Signature

**APPLICANT NOTIFIED OF INTERVIEW RESULT:**

By Name:

Date: 

|   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|
| D | D | M | M | Y | Y | Y | Y |
|---|---|---|---|---|---|---|---|

**WARRANT APPLICATION FOR SUCCESSFUL CANDIDATE**

**THIS IS AN APPLICATION FOR:**

Limited Warrant (*Maximum 18 months*)

Warrant (*Maximum 5 Years*)

Appointment to a Role (Volunteer)

Event Warrant  Event

Appointment to a Role (Paid Employee SD purposes)

**Duration**

|  |            |
|--|------------|
|  | Start Date |
|  | Start Date |
|  | Start Date |
|  | End Date   |
|  |            |

Requested by

District / Region / National

Name:

SSA Role:

Date: 

|   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|
| D | D | M | M | Y | Y | Y | Y |
|---|---|---|---|---|---|---|---|

Signature: Warrants Committee / Authorised Person

Criminal/Police Clearance Confirmed on Scouts.Digital: Yes  No: