



**SRI LANKA SCOUT ASSOCIATION**  
**ROVER SCOUT SECTION**  
**Application Form for the Leadership Star (RS-04)**

DISTRICT: ..... Rover's Registration No: .....

Name in Full: .....

Name with Initials: .....

Date of Birth: ..... Date Invested: .....

Rover Crew: ..... Home Address: .....

Crew Reg. No: ..... Mobile No: .....

Crew Address: ..... Email Address: .....

**1. Leadership Star**

Date of Commencement: 

DD	MM	YYYY
DD	MM	YYYY

Duration: 

Y		M		D	
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Date of Completion: 

DD	MM	YYYY
DD	MM	YYYY

**2. Knowledge & Training Gained**

	Skill	Yes / No		Attachment of Proof		Notes
		Yes	No	Available	Not Available	
a)	Disaster Management	Yes	No	Available	Not Available	
b)	Counselling	Yes	No	Available	Not Available	
c)	Leadership Training	Yes	No	Available	Not Available	

**3. Leadership Training Course**

Course Title: .....

Organized by: .....

Date/s: from ..... to .....

Venue: .....

No of Participants: .....

Brief Description: .....

**4. Community Service Project**

Project Title: .....

Name of the Project: .....

Dates: from ..... to .....

Venue: .....

Description (in Brief): .....

**Participants (Community Service Project):**

1.	Rovers/Community	1.
		2.
		3.
		4.
		5.
		6.
		7.
		8...
2.	Rover Scout Masters	1.
		2.
3.	Parents	1.
		2.
4.	Invitees / Guests	1.
		2.
5.	Other Organizations	1.
		2.

**5. Project Report (Community Service Project)**

1. Introduction
2. Aims and Objectives
3. Preparation / Planning
4. Time Frame / Gantt Chart
5. Budget
6. Detailed Report

		Availability	
		Yes	No
1.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**6. Date of Submission**

Date approved by Crew-in Council  
 (Please attach Certified Copy of Minutes)

DD	MM	YYYY
DD	MM	YYYY

**7. RECOMMENDATION**

We hereby certify that the Rover Scout ..... (Name)  
 has completed all requirements for the **Leadership Star (RS-04)**.

.....  
 Sign/- Applicant      Chairman,      Rover Scout Master      ADC (Rovers)  
 (Rover Scout)      Rover Crew in Council  
 Name/Warrant No      .....

**8. FOR BADGE SECRETARY'S USE**

Date: .....  
 Name of Rover Scout: ..... Rover's Reg. No: .....  
 Rover Crew: ..... Crew Reg. No: .....  
 Date Passed (Scoutcraft Star RS-02): .....  
 Badge Secretary's Signature: .....