



SHQ Serial No .....

RHQ Serial No.....

G

**THE BHARAT SCOUTS AND GUIDES**

NATIONAL HEADQUARTERS, NEW DELHI

**Registration Form for Rashtrapati Guide Award**(To be filled by the candidate in her own handwriting *in Capital Letters*.)

Overwriting/use of fluid will not be accepted)

State \_\_\_\_\_

1. Name of the Guide \_\_\_\_\_

2. (a) Father's Name \_\_\_\_\_

(b) Mother's Name \_\_\_\_\_

3. . Date of Birth \_\_\_\_\_

(Supported by Admit Card/Mark Sheet/Certificate of class X/Secondary Board Examination, attested copy of certificate should be attached)

4. Home Address \_\_\_\_\_

P.O. \_\_\_\_\_ District \_\_\_\_\_ State \_\_\_\_\_

Pin code \_\_\_\_\_ Telephone/Mob No. \_\_\_\_\_

E mail ID \_\_\_\_\_ Aadhaar No. \_\_\_\_\_

(Attach photocopy of Aadhaar Card)

5. Name and address of Company \_\_\_\_\_

District \_\_\_\_\_

Charter No. \_\_\_\_\_ Date of Issue \_\_\_\_\_ Date of Validity \_\_\_\_\_

Signature of Guide Captain

Signature of Guide

6. Name of the Guide Captain \_\_\_\_\_

Guiding Qualification:- \_\_\_\_\_ Certificate No.: \_\_\_\_\_ Date:- \_\_\_\_\_

Warrant No. \_\_\_\_\_ Date of Issue \_\_\_\_\_ Date of validity \_\_\_\_\_

(Attach photocopy of Certificate/Parchment and Warrant of GC)

Certified that the information given above is correct as per the District/State Records

Seal &amp; Sign. of Dist. Org. Commissioner (G)

Date:

Seal &amp; Sign. of Dist. Secretary

Date:

Seal &amp; Sign. of State Org. Commissioner (G)

Date:

Seal &amp; Sign. of State Secy/Jt. Secy.

Date:

NB: Information Sheet attached.

**For National Headquarters use**

Date of Receipt of Application at RHQ \_\_\_\_\_ Remarks \_\_\_\_\_

Checked by (Name&amp;Designation) \_\_\_\_\_ Signature \_\_\_\_\_

Signature of Asst. Director

Signature of Dy. Director (GP)

## Date of Birth Certificate

This is to certify that Miss \_\_\_\_\_

D/o \_\_\_\_\_ is a student of \_\_\_\_\_

\_\_\_\_\_ School/College studying in class \_\_\_\_\_  
in the year \_\_\_\_\_. Her date of Birth is \_\_\_\_\_ (in figures)

\_\_\_\_\_ (in words) as per her School/College record.

**Signature**

Date.....

**(Office Seal)**

**Head of the Institution**

# THE BHARAT SCOUTS AND GUIDES, NATIONAL HEADQUARTERS, NEW DELHI

## INFORMATION SHEET FOR GUIDE (to be attached with Rashtrapati Guide Award Registration Form)

**NB: To be filled by the Candidate in his own handwriting in Capital letters. Overwriting / use of fluid will not be accepted**

1. Name of the State:.....
2. Name of the Guide:.....
3. (A) Father's Name:.....  
(B) Mother's Name:.....
4. Date of Birth:.....
5. Date of (I) Joining the Company.....  
(II) Completion of Pravesh.....  
(III) Investiture.....  
(IV) Completion of Pratham Sopan.....  
(V) Completion of Dwitiya Sopan.....  
(VI) Completion of Tritiya Sopan.....  
(VII) Completion of Rajya Puraskar.....

Rajya Puraskar Testing Camp held at.....from.....to.....

Certificate No.....Date of Issue.....

**15 (x) of APRO III (Detail of Proficiency Badges earned for Dwitiya Sopan)**

Name of Badge	Date of Passing	Name of the Examiner

**16 (10) of APRO III (Details of Proficiency Badges earned for Tritiya Sopan)**

Group	Name of Badge	Date of Passing	Name of the Examiner
A			
B			

**17 (viii) of APRO III (Details of Proficiency Badges earned for Rajya Puraskar)**

Name of Badge	Date of Passing	Name of the Examiner

**17 (ix) of APRO III (Details of Proficiency Badges earned for Rajya Puraskar)**

Name of Badge	Date of Passing	Name of the Examiner

## Details of the work done for Rashtrapati Guide Award

### 18 (B) (ii) a of APRO III (Detail of Camping )

Camping Place	Dates		Name of the Leader of the camp
	From	To	

### 18 (B) (iii) a of APRO III (Detail of Disaster Management Badge )

Date of Passing	Name of the Examiner

### 18 (B) (iii) b of APRO III (Detail of Ambulance Badge )

Date of Re- Pass	Name of the Examiner

### 18 (B) (iv) of APRO III (Detail of Proficiency Badge earned for Rashtrapati Guide Award )

Name of Badge	Date of Passing	Name of the Examiner

### 18-B (v) of APRO III (Details of Sustained Community Development Project)

Name of the Project undertaken	Dates		Service Hrs.
	From	to	
1.			
2.			

### 18-B (vi ) of APRO III (Details of Teaching Games)

Name of Locality	Date		No of Children
	From	To	

Note: List of names of Children with their age and Father's name and a copy of the appreciation letter from Parent / Head of the Institution to be produced with details.

**OR**

### Knowledge of Interior Decoration and Fancy Cooking.

### 18-B (vii ) of APRO III (Details of World Centres of WAGGGS)

Date of Submission of Log Book

Note: All relevant records, Log Books & Certificates should be produced in the testing camp as and when demanded.

Date : .....

Signature of Guide

Certify that the above information is correct and verified by me.

**Signature of Guide Captain  
Date:**

**Seal & Sign. of District Org. Commissioner (G)  
Date:**

***Attended State Level Rashtrapati Guide Testing Camp held at.....  
from.....to..... and recommended to apply for Rashtrapati Guide Award  
Testing Camp organized by the National Association.***

**Seal & Sign. of State Organizing Commissioner (G)**

**Date:**

**Note : 01. All relevant records, Progress Card, Log Books and certificates, will be produced at the time of Testing Camp.  
02. Incomplete / Contradictory information will be rejected.**

**Photocopy of Documents to be attached:-**

- 1. Date of Birth Certificate**
- 2. Aadhaar Card**
- 3. Guiding Qualification Certificate and Warrant of Unit Leader**
- 4. Rajya Puraskar Certificate**