

# GOLD AWARD PROPOSAL



## PARTICIPANT DETAILS

Version 5 – 11/2016

<b>PARTICIPANT NAME:</b>			
<b>ADDRESS:</b>			
		<b>POSTCODE:</b>	
<b>EMAIL:</b>			
<b>DATE OF BIRTH:</b>		<b>PHONE:</b>	
<b>AWARD UNIT</b>		<b>AWARD LEADER</b>	
Section	Chosen Activity	Assessor	Goals (Specific/Measurable/Achievable/Relevant/Time-bound)
<b>PHYSICAL RECREATION</b>  Major Y / N		Name:  Qualifications:  Experience:  Working With Children Check: (if Participant is under 18y/o)	Note: State your current level of ability and where you would like to be/what you would like to achieve at the end of your time requirement

Section	Chosen Activity	Assessor	Goals (Specific/Measurable/Achievable/Relevant/Time-bound)
<p><b>SKILL</b></p> <p>Major Y / N</p>		<p>Name:</p> <p>Qualifications:</p> <p>Experience:</p> <p>Working With Children Check: (if Participant is under 18y/o)</p>	<p>Note: State your current level of ability and where you would like to be/what you would like to achieve at the end of your time requirement</p>
<p><b>SERVICE</b></p> <p>Major Y / N</p>		<p>Name:</p> <p>Qualifications:</p> <p>Experience:</p> <p>Working With Children Check: (if Participant is under 18y/o)</p>	<p>Note: State your current level of ability and where you would like to be/what you would like to achieve at the end of your time requirement</p>

Section	Chosen Activity	Assessor	Goals (Specific/Measurable/Achievable/Relevant/Time-bound)
<b>ADVENTUROUS JOURNEY: PRACTICE</b>	Exploration or Expedition	Name:  Qualifications:  Experience:  Working With Children Check: (if Participant is under 18y/o)	
<b>ADVENTUROUS JOURNEY: QUALIFYING</b>	Exploration Or Expedition (must be the same type as practice journey)	Name:  Qualifications:  Experience:  Working With Children Check: (if Participant is under 18y/o)	

Section	Chosen Activity	Assessor	Goals (Specific/Measurable/Achievable/Relevant/Time-bound)
<b>RESIDENTIAL PROJECT</b>		Name:  Qualifications:  Experience:  Working With Children Check: (if Participant is under 18y/o)	
	My reason/s in registering for the Gold Award		
<b>PARTICIPANT SIGNATURE</b>		<b>DATE</b>	
<b>AWARD LEADER SIGNATURE</b>		<b>DATE</b>	
<b>ONCE COMPLETED:</b> Email to <a href="mailto:info@dukeofedwa.org.au">info@dukeofedwa.org.au</a>			
<b>OFFICE USE ONLY</b>	<b>APPROVED</b>	<b>NOTIFICATION SENT</b>	