



# Boy Scouts of the Philippines

## National Office

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JAN 19 2017

### NATIONAL OFFICE MEMORANDUM

Number 11 series of 2017

**TO :** All Regional Scout Directors, Council Scout Executives and Officers-In-Charge

**SUBJECT :** WOSM's LEADERSHIP WORKSHOP (Asia-Pacific Region)

1. The World Organization of the Scout Movement (WOSM) will conduct the **WOSM's LEADERSHIP WORKSHOP** on 24-26 February 2017 at El Cielito Hotel, Santa Rosa City hosted by the World Scout Bureau/Asia-Pacific Region (WSB/APR).
2. The Boy Scouts of the Philippines (BSP) will organize participants to represent the Philippines to the said workshop.
3. The basic information to the said event, are as follows:

**Date :** 24-26 February 2017  
*(Participants are requested to arrive on 23 February 2017 and may leave late in the afternoon of 26 February 2017, after the Closing Ceremony)*

**Participants :** Any adults who hold a role as trainers or/and in the leadership of an NSO

**Registration :** USD150.00 per person which includes accommodation *(from 23 February until 26 February 2017)* and meals *(Breakfast of 24 February until lunch of 26 February 2017)*.

Deadline for submission of application form is **on or before Friday, 27 January 2017**.

4. For information, guidance and widest dissemination of all concerned.

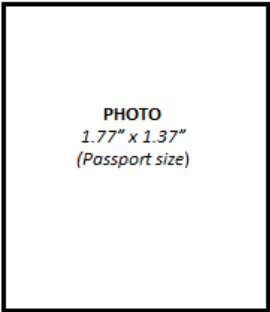
  
**ROGELIO S. VILLA, JR.**  
Acting Secretary General

Encl.: International Application Form

FOD.SDH/mgi



BOY SCOUTS OF THE PHILIPPINES  
NATIONAL OFFICE  
Manila



APPLICATION FORM  
(for International Events)

Please complete all parts of the application form in block letters

Scouting Event: \_\_\_\_\_  
Name of Local Council: \_\_\_\_\_ Region: \_\_\_\_\_

PERSONAL DETAILS:

Surname: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_ Nickname: \_\_\_\_\_  
Gender: \_\_\_\_\_ Date of Birth: \_\_\_\_/ \_\_\_\_/ \_\_\_\_ (dd/mm/yy) Place of Birth: \_\_\_\_\_  
Height: \_\_\_\_ Weight: \_\_\_\_ Blood Type: \_\_\_\_ Nationality: \_\_\_\_\_ Religion: \_\_\_\_\_  
Father's Name: \_\_\_\_\_ Mother's Name: \_\_\_\_\_  
Home Address: \_\_\_\_\_ City/Province: \_\_\_\_\_ Zip: \_\_\_\_\_  
Tel No.: \_\_\_\_\_ Mobile No.: \_\_\_\_\_ Fax No.: \_\_\_\_\_ E-mail: \_\_\_\_\_  
Passport No.: \_\_\_\_\_ Date issue: \_\_\_\_\_ Date of expiration: \_\_\_\_\_

School or Profession: \_\_\_\_\_ Grade or Level of Education: \_\_\_\_\_  
Address: \_\_\_\_\_ Telephone No: \_\_\_\_\_  
Scouting Position: \_\_\_\_\_ Scout Unit: \_\_\_\_\_ Rank: \_\_\_\_\_  
Membership Card No.: \_\_\_\_\_ Expiration Date: \_\_\_\_/ \_\_\_\_/ \_\_\_\_ (dd/mm/yy)  
Camping, Jamboree & Training experiences (Title, Venue, and Inclusive Dates):  
\_\_\_\_\_  
\_\_\_\_\_

Honors/Awards/Recognition received (Organization, Title of award and date received):  
\_\_\_\_\_  
\_\_\_\_\_

Special Skills/Qualifications: \_\_\_\_\_  
\_\_\_\_\_

CONTACT PERSON IN CASE OF EMERGENCY:

Name: \_\_\_\_\_  
Relationship: \_\_\_\_\_ Address: \_\_\_\_\_  
Tel No.: \_\_\_\_\_ Mobile No.: \_\_\_\_\_ Fax No.: \_\_\_\_\_ E-mail \_\_\_\_\_

I do hereby to agree to exert my very best effort to be worthy as representative not only of the Boy Scouts of the Philippines but also of my country thru my strict observance of the Scout Ideals as embodied in the Scout Oath and Law.

And, as a faithful delegate, I shall abide by the decision of the duly designated Contingent Head who has been authorized to exercise all actions necessary to maintain the prestige of the Philippines in general and the Boy Scouts of the Philippines in particular.

Applicant's Signature \_\_\_\_\_  
Date \_\_\_\_/\_\_\_\_/\_\_\_\_(dd/mm/yy)

HEALTH DETAILS

Name: \_\_\_\_\_ Local Council: \_\_\_\_\_  
Special Health Problem (Do you have any illness of the following?)  
☐ Heart disease ☐ Hay fever ☐ Diabetic ☐ Hypertension ☐ Fainting  
☐ Haemophilia ☐ Asthma ☐ Epileptic ☐ Sleep Walking ☐ Autism  
Any other Allergies \_\_\_\_\_  
Any physical disability \_\_\_\_\_  
Others (please specify) \_\_\_\_\_  
Recommendation and/or restrictions (if none, so state): \_\_\_\_\_  
Physician (Signature over Printed Name): \_\_\_\_\_ License No.: \_\_\_\_\_

APPROVAL OF PARENTS OR GUARDIAN

(for applications of minor age)

We hereby approve this application and certify to its correctness. In consideration of the benefits to be derived, we expressly waive any and all claims again the Boy Scouts of the Philippines or its representatives on account of any incident or injury or damage to personal property that may occur beyond the control of the Contingent Officials/BSP provided adequate safety measures and precautions have been instituted in connection with the participation of Scout \_\_\_\_\_ in the \_\_\_\_\_.

We further agree to have said Scout meet the health requirements which includes his examination by a Medical Officer who will use the form provided by the National Office, BSP, for this purpose and obtain certification from school authorities attesting to his academic standing.

\_\_\_\_\_  
Father/Guardian  
(signature over printed name)

\_\_\_\_\_  
Mother/Guardian  
(signature over printed name)

\_\_\_\_\_  
Date

ACTION OF THE LOCAL COUNCIL

Date:\_\_\_\_\_

We hereby certify that the above applicant has met all the requirements for participation in his Scout event as set forth by the National Office of the Boy Scouts of the Philippines. We have personally interviewed Scout \_\_\_\_\_ and found him physically fit and qualified to be member of the BSP Contingent. He is currently registered and on the basis of his record of satisfactory Scouting experience and his cooperative attituded towards his fellow Scouts/Scout Leaders, we recommend his acceptance as a member of the Philippine Delegation.

\_\_\_\_\_  
Troop Leader/Outfit Advisor

\_\_\_\_\_  
Institutional Head

\_\_\_\_\_  
Council Scout Executive

\_\_\_\_\_  
Council Chairman

ACTION OF THE REGIONAL OFFICE

Recommending Approval:

\_\_\_\_\_  
Regional Scout Director

\_\_\_\_\_  
Date

ACTION OF THE NATIONAL OFFICE

Recommending Approval:

\_\_\_\_\_  
Director, Field Operations Division

\_\_\_\_\_  
Date

Approved:

\_\_\_\_\_  
Officer-In-Charge/Secretary General

\_\_\_\_\_  
Date

**NOTE:** Please return this form together with the **PHOTOCOPY OF YOUR PHILIPPINE PASSPORT** and submit to the Boy Scouts of the Philippines – International Affairs Section, Field Operations Division at 181 Natividad Almeda-Lopez Street, Ermita, Manila Philippines or Email: [bsp@scouts.org.ph](mailto:bsp@scouts.org.ph).