



**2020 Lincoln Heritage Council
SCOUTS BSA JOB SPECIFIC TRAINING
Scoutmaster/Assistant Scoutmaster
Troop Committee Chair/Troop Committee Member
Merit Badge Counselor**

<u>Date</u>	<u>Time</u>	<u>Location</u>	<u>Contact</u>
12/5/2020	8am to 3pm (ET)	Sam Swope Scout Center	Charlie Bunge -- chbungesr@aol.com
There will be a one hour break for lunch on your own			

This training is intended for all Scouts BSA leaders to be able to complete your classroom trainings all in one setting. You will need to be a registered scouter to receive credit for the training.

Upon completing this training you will have completed all of the Scouts BSA specific classroom trainings.

You will receive credit for S24-Scouts BSA Job Specific-Scoutmaster/Assistant Scoutmaster. You will still need to complete S11-Introduction to Outdoor Leader Skills (Overnight Campout Training). Also, you will need to complete the on-line module-SCO_800 Hazardous Weather. Upon completion of these three trainings you will be considered trained for the position of Scoutmaster and Assistant Scoutmaster.

You will receive credit for D76-Merit Badge Counselor Orientation. Upon completion you will be considered a trained Merit Badge Counselor.

You will receive credit for WS10-Troop Committee Chairman/Troop Committee Member. Upon completion you will be considered a trained Troop Committee Chairman and a trained Troop Committee Member.

For information or questions, contact the Scout Service Center at (502) 361-2624 or Matt.Nash@scouting.org. For additional training information, online registration, and refund policy visit www.lhcbsa.org. We will follow the Council/District refund policy listed on the Council website.

Cost \$5: Time will be provided to have lunch on your own.

Mail to: Lincoln Heritage Council – 12001 Sycamore Station Place, Louisville, KY 40299

Make Checks Payable: LHC BSA **FAX Form Number:** 502-361-7899

Cut off dates for Registration will be set for 3 business days prior to training

Name _____ **Unit#** _____ **District** _____

Email Address _____ **Phone Number** _____

List your current registered position: _____

Name on Credit Card: _____

Billing Address: _____

City: _____ State: _____ Zip: _____

Amount to be Charged: _____ Credit Card #: _____

Card Expiration Date: _____

CVC (Code on back of card): _____

6801-171-20

Due to Covid 19, there are only a limited number of seats available. To receive credit for this training you must attend the entire training. No credit will be given if you leave before the end of the training.

Masks are required for all attending this training. Please complete and return the form at registration.

Lincoln Heritage Council, BSA
12001 Sycamore Station Place
Louisville KY 40299

COVID Pre Screening form to be filled out by youth and adults attending council program activities.

First Name: _____ Last Name: _____

Youth/ Adult: Circle one. Unit number _____ Date of prescreening: _____

Name of event you are attending: **Scouts BSA Job Specific Training** Location of Event: **Sam Swope Scout Center**

Answer these questions. Circle Y(Yes) or N(No)

1. Do you have any of these symptoms that are not caused by another condition?

- | | |
|--|-----|
| a. Fever or chills | Y/N |
| b. Cough | Y/N |
| c. Shortness of breath or difficulty breathing | Y/N |
| d. Fatigue | Y/N |
| e. Muscle or body aches | Y/N |
| f. Headache | Y/N |
| g. Recent loss of taste or smell | Y/N |
| h. Sore throat | Y/N |
| i. Congestion | Y/N |
| j. Nausea or vomiting | Y/N |
| k. Diarrhea | Y/N |

2. Within the past 14 days, have you had contact with anyone that you know had COVID-19 or COVID-like symptoms? Contact is being 6 feet (2 meters) or closer for more than 15 minutes with a person or having direct contact with fluids from a person with COVID-19 (for example, being coughed or sneezed on).

Y/N

3. Have you had a positive COVID-19 test for active virus in the past 10 days?

Y/N

4. Within the past 14 days, has a public health or medical professional told you to self-monitor, self-isolate, or self-quarantine because of concerns about COVID-19 infection?

Y/N