

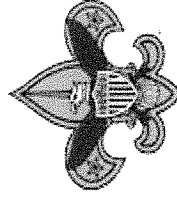
NYLT is Boy Scouts of America's premiere youth leadership development program. It is an intensive, FUN, hands-on, and challenging 2-weekend program that combines outdoor adventure and classroom instruction, to provide Scouts with experiences and tools to become great leaders.

NYLT focuses on the concepts of what a leader must BE, what a leader must KNOW, and what a leader must DO. Participants learn and develop skills such as communication, problem solving, making presentations, team development, working with adult leaders and youth in administrative areas, and ethical decision-making. Graduates of NYLT become senior leaders in their Troop and Crew, as well as leaders in their schools, churches, and communities.

The course is led and taught by some of the best youth leaders in Prairielands Council, who are graduates of NYLT and typically have staffed other programs. The adult advisors who assist the Youth Staff are Wood Badge trained with extensive experience in training programs.

This 2-weekend course is for mature Boy Scouts and male or female Venturing Scouts who are at least First Class in rank and 14 years of age (or in the eighth grade), who want to become great leaders. Potential participants must be approved by their Scoutmaster/Venturing Advisor, and be in a leadership position or have the potential to do so in their home Troop or Crew. **ALL PARTICIPANTS MUST ATTEND BOTH WEEKENDS of February 23-25 and March 9-11, 2018 to receive credit for taking NYLT.**

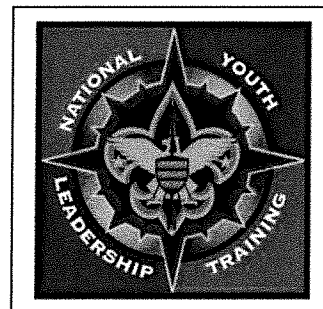
Total course fee is \$180, if registration and balance is received by January 26, 2018 (\$200 after Jan. 26<sup>th</sup>). Please contact your Troop or Crew Committee for available training scholarships. For more information, contact Course Director Dakorie McElhane at 217-255-3356 or at [scout7596@hotmail.com](mailto:scout7596@hotmail.com)



## Prairielands Council's NATIONAL YOUTH LEADERSHIP TRAINING

In the cabins of Camp Robert Drake, during the combined weekends of February 23-25 & March 9-11, 2018!

**Participant Application for  
National Youth Leadership Training  
February 23-25 & March 9-11, 2018 at  
Camp Robert Drake - Oakwood, Illinois**



**Send this application with the \$180 fee  
Before January 26, 2018 (\$200 after Jan. 26<sup>th</sup>)  
Payable to NYLT, Prairielands Council  
3301 Farber Drive, Box 6267, Champaign, IL 61826  
Phone: 217/531-3010 or 800/464-7291**

**PARTICIPANT INFORMATION** (Please Print Clearly)

Scout's First Name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_ Last Name: \_\_\_\_\_  
 Nickname: \_\_\_\_\_ Birth Date: (be 14 or in 8<sup>th</sup> grade by course) \_\_\_\_\_  
 Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Telephone: \_\_\_\_\_ E-mail address: \_\_\_\_\_  
 Troop# \_\_\_\_\_ or Crew# \_\_\_\_\_ District: \_\_\_\_\_ Council: \_\_\_\_\_  
 Current Leadership Position: \_\_\_\_\_ Gender: Male / Female  
 Current Rank: \_\_\_\_\_ Adult T-shirt size: XXL \_\_\_\_\_ XL \_\_\_\_\_ L \_\_\_\_\_ M \_\_\_\_\_ S \_\_\_\_\_

**CERTIFICATION & APPROVAL SIGNED BY SCOUTMASTER OR CREW ADVISOR**

Leader: \_\_\_\_\_ E-mail: \_\_\_\_\_ Phone: \_\_\_\_\_  
 Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Troop# \_\_\_\_\_ or Crew# \_\_\_\_\_ District: \_\_\_\_\_ Council: \_\_\_\_\_

"I recommend the acceptance of this Scout as a representative of our Unit in the NYLT course. I certify that they meet the age and rank requirements. I further certify that they are serving as, have served as, or have the potential to be our Troop SPL/Crew President. I will do all that I can to help them accomplish their personal leadership goals and to apply leadership skills in our Unit."

\_\_\_\_\_  
**Signature of Scoutmaster or Crew Advisor**

\_\_\_\_\_  
**Date**

\_\_\_\_\_ Please contact me to discuss this Scout in more detail.

**PARENTAL/GUARDIAN AUTHORIZATION**

My child (name) \_\_\_\_\_ has my permission to participate in the Prairielands Council National Youth Leadership Training. I have read, understand, and agree to the program requirements. I understand that during this program my child will be expected to follow the Scout Oath and Law, participate in the entire program, follow program rules, and that serious violations will result in dismissal from the program. I understand that my child must provide a current and complete BSA Annual Health and Medical Record (Parts A, B, and C) to participate. My child will need the following accommodations for Medical, Physical, Dietary or Religious reasons:

\_\_\_\_\_  
 \_\_\_\_\_

Parent Signature: \_\_\_\_\_ Print Name: \_\_\_\_\_  
 Daytime Phone #: \_\_\_\_\_ Night-time Phone #: \_\_\_\_\_  
 Parent's E-mail: \_\_\_\_\_ Date: \_\_\_\_\_