

SCOUTS VICTORIA

Grey Wolf Award Application



Form GW

The form must be **submitted**, by the Cub Scout Leader, to the Victorian Scout Centre, while the youth member is still a Cub Scout and before the Cub Scout's 11th birthday.

post to: Victorian Scout Centre 152 Forster Road Mt Waverley 3149

email to: youthawards@scoutsvictoria.com.au and cc your District Leader Cub Scouts (DLCS) & Group Leader (GL).

Cub Scout's name _____ Registration ID _____

Date of birth _____ / _____ / _____ Pack _____

District _____ Region _____



Has successfully achieved the following requirements for the Grey Wolf Award.

1	Gold Boomerang	Date:	
2	In the past twelve months participated in a minimum of 4 outdoor activities.		
	A	Overnight camp (brief description), NOTE – Cuboree is not acceptable	Date:
	B	Inter-pack activity (brief description), NOTE – Not Cuboree	Date:
	C	Activity 3 (brief description), NOTE – Cuboree is not acceptable	Date:
4	D	Using a map, plan and lead a hike/day walk of at least two hours duration with a Leader and a group of three to six Cub Scouts. Make sure everyone has appropriate equipment, clothing, food and a personal first aid kit for the chosen walk. Only one Cub Scout per hiking/walking party can qualify for this award. Participating Cub Scout names:	Date: Venue:
	3	In the past twelve months attended 2 Pack Councils	Date: _____ Date: _____
	4	Has completed 4 level 2 Achievement badges including the following:	
		Level 2 Arts and Literature	Badge: _____ Date: _____
Level 2 Nature, Science and Technology		Badge: _____ Date: _____	
Level 2 Sports and Recreation		Badge: _____ Date: _____	
5	Level 2 Our World	Badge: _____ Date: _____	
	5	Has completed 1 of the 8 Special Interest badges	Badge: _____ Date: _____
6	Develop and present a resource for your Six or Pack based on your understanding of the Jungle Books. Brief description of resource: _____ Date presented to the Pack: _____		

Cub Scout's school: _____

School year level: _____

We certify that the above details are correct and that the Pack Council has approved the Grey Wolf Award for this Cub Scout

Pack Council Representative Name _____ Signature _____ Date: _____

Cub Scout Leader Name _____ Signature _____ Date: _____

Name and Address to which the Award is to be sent (usually CSL): _____