

# TRAINING ATTENDANCE REPORT

## BOY SCOUTS OF AMERICA

Name of training course \_\_\_\_\_

Location \_\_\_\_\_  
(Name of chartered organization if new or reorganized unit)

Course date(s) \_\_\_\_\_ District \_\_\_\_\_

**INSTRUCTIONS**

Please print or email all information requested. Be sure to fill in the titles of the training sessions & check attendance. Send original report to the Center for Scouting promptly – Attn: Jennifer Houldsworth ([Jennifer.Houldsworth@Scouting.org](mailto:Jennifer.Houldsworth@Scouting.org))

**(PLEASE USE BALLPOINT PEN)**

Name <b>(PLEASE PRINT CLEARLY)</b>	Position	Unit #	Address	Session title and date										Date certificate issued	
1.															
2.															
3.															
4.															
5.															
6.															
7.															
8.															
9.															
10.															
11.															
12.															
13.															
14.															
15.															
16.															