

Scout Name: (please print) _____

SCOUT SKILLS TRAINER CERTIFICATE – SELF-EVALUATION FORM

Please fill out the form using the following scale:

1. I do not know how to accomplish the skill without the help of others
2. I somewhat know how to accomplish the skill individually
3. I know how to accomplish the skill but do not know how to teach it to others
4. I know how to accomplish the skill and are able to teach others using EDGE
5. I know how to accomplish the skill and have taught another Scout using EDGE (name Scout)

Skill or Knowledge Item	1st Certif. Period Rating 1 to 5	2nd Certif. Period Rating 1 to 5	3rd Certif. Period Rating 1 to 5	If Rating is 5 name of Scout(s) that YOU trained
GENERAL SCOUT KNOWLEDGE				
Recite without any assistance the following items: <ul style="list-style-type: none"> • Pledge of Allegiance • Scout Oath • Scout Law • Outdoor Code 				
Give the Scout Motto				
Give the Scout Slogan				
How to Raise, Lower and Fold a Flag				
KNOTS				
Tie a Square knot				
Tie Two Half Hitches and its use				
Taunt Line Hitch and its use				
Tie a Clove Hitch				
Tie Timber Hitch				
Tie Square / Diagonal / Shear Lashings and when they can be used				
Tie a Bowline knot				
PERSONAL SAFETY				
Describe the Buddy System				
Describe what to do when Bullied or observe Bullying (in person or on the web)				
Rules of a Safe Hike				
What to do when Lost				
Precautions for a Safe Swim				
Rules of Safety Afloat (Canoe Trip)				
Water Rescue Methods (Reach, Throw, Row, Tow, Go)				
COOKING				
Basic Fire building				
What is a good / nutritious meal				
Basic Cooking Utensils in a camp box				
Transport, Storage and Safe Food Handling				

Skill or Knowledge Item	1st Rating 1 to 5	2nd Rating 1 to 5	3rd Rating 1 to 5	If Rating is 5 name of Scout(s) that YOU trained
FIRST AID				
Items in a Personal First Aid Kit				
What to do for "Hurry Cases" (Bleeding, Breathing, Heart Beat, Internal Poisoning)				
5 Common Signals of Heart Attack				
Choking – Heimlich Maneuver				
Simple Cuts & Puncture Wounds				
Blisters & Burns (minor & serious)				
Smoke Filled Room				
Frostbite & Sunburn				
Broken bones or Sprains				
Shock				
Heat Exhaustion vs Heat Stroke				
OUTDOOR SKILLS				
Principles of "Leave No Trace"				
Handling, Sharpening, and Passing a Knife / Axe				
Local Plants				
Local Wild Animals				
Equipment Needed for an Overnight Camp				
Orient a Map – Include Magnetic Declination				
Map Symbols, Scale, & Contour Lines				
Use of Compass				
Find Directions without Compass (night, day)				

After completing this form, arrange a meeting with your Color Team Leader to review this "Self-Evaluation" for completeness. The Leader will discuss any of your concerns regarding the above skills and training of other Scouts using the EDGE method. After review, take the signed form to the Leadership Chair to record your "Scout Skills Trainer Certificate".

**KEEP THIS FORM WITH YOUR SCOUT BOOK
IT WILL SHOW YOUR PROGRESSION AS A TRAINER OF SCOUT SKILLS
It would be best to print this form front & back (2-sided) on a single page**

Scout Name (please print) _____

FIRST Trainer Certificate Award Review Date: _____

Scout Signature: _____ Reviewed By: _____

SECOND Trainer Certificate Award Review Date: _____

Scout Signature: _____ Reviewed By: _____

THIRD Trainer Certificate Award Review Date: _____

Scout Signature: _____ Reviewed By: _____