



Prickly Pear Training Log Montana Council BSA

Name: _____ Position: _____

Unit: Pack/Troop/Ship/Post/Crew _____

Mailing Address: _____

Phone: _____ Cell: _____ Email: _____

New Leader Fast Start: Date Completed _____

Youth Protection: Date Completed _____

Safety Afloat: Date Completed _____

Safe Swim Defense: Date Completed _____

Hazardous Weather: Date Completed _____

Climb on Safety: Date Completed _____

Leader Essentials Indoor Training: Date Completed _____

Leader Essentials Outdoor Training: Date Completed _____

Trek Safely: Date Completed _____

Webelos BALOO Training: Date Completed _____

Cub Leader Specific Training: Date Completed _____

Wood Badge: Course Number _____ Date Completed _____

College of Commissioner Science Bachelors: Date Completed _____

College of Commissioners Science Masters: Date Completed _____

College of Commissioners Science Doctorate: Date Completed _____

Troop Committee Challenge: Date Completed _____

Leave no Trace Training: Date Completed _____

Chain Saw Safety Training: Date Completed _____

Merit Badge Instructors Guide Training: Date Completed _____

Order of the Arrow Ordeal: _____

Brotherhood: _____

Vigil: _____

Any Training from bygone days that is not currently listed please do so.