



## UNIT LEADER TRAINING APPLICATION FOR EXEMPTION



Name of Applicant : \_\_\_\_\_

NRIC No : \_\_\_\_\_

Present Occupation : \_\_\_\_\_

Name of School : \_\_\_\_\_

Area : C / NE / NW / SE / SW / HQ

Present Scout Appointment : CSL / ACSL / SL / ASL / VSL / RSL / ARSL / GSL / Others

Course/Module(s) for Exemption	Reason(s) for Exemption *	Approved By (Name and Appointment)

Note\*: To attach documentary proof

Remarks : (if any) \_\_\_\_\_

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