

**Bushwalking: Level 2 Weekend walks**

Applicant Details:

Name:	Date of birth:
Scout Formation and Group:	Member number:
Email address:	Phone contact:

item	Skill	Date of demonstration	verifier initials
Age range	The candidate is of Scout age or above		
Pre-requ	The candidate meets all of the requirements of Bushwalking Level 1 weekend walks		
	The candidate meets all of the requirements of Bushwalking Level 2 day walks		
Equipment	Demonstrate the correct care and maintenance of personal equipment		
Navigation	Demonstrate how to care for and orient a map by both compass and physical features		
	Demonstrate how to establish direction using the sun in daylight and stars at night, and navigate between two points over at least one kilometre in a bush environment.		
	Demonstrate how to use a GPS in conjunction with a map and compass.		
Weather	Demonstrate an understanding of the effects weather has on this activity		
	Interpret two different weather forecasts and explain how they will effect this activity and if necessary any precautions that would need to be taken		
Environment	Demonstrate an understanding of minimal impact practices applicable to this activity		
Leadership	Plan, demonstrate safe leadership of, and go on a hike for a weekend (overnight) on a marked walking trail in a familiar area. For youth members a suitably qualified adult leader must monitor the hike. <i>Comments:</i>		
Emergencies	State at least ten different situations in this activity that could be classified as an emergency and what you would do.		

item	Skill	Date of demonstration	verifier initials
First Aid	Demonstrate an understanding of a) How to approach an unconscious patient b) How to identify that the patient is breathing c) How to place a patient in the recovery position d) The difference between venous and arterial bleeding e) How to control all forms of external bleeding f) Describe the risks of, and demonstrate the treatment for near drowning.  OR		
	If over (and upon reaching) 15 years of age hold 'Apply first aid' (HLTFA301B) or equivalent. Type: _____ Number: _____	Expiry date	Certified Copy
Log Book	Present personal log book with relevant entries, including at least one detailed trip report		

I verify that all documentation and evidence given to support the above is true and correct. Candidate's Name: ..... signature: .....	I verify that the participant has demonstrated or provided evidence to demonstrate the above requirements. Level 3 verifier: name.....  signature:..... Date: .....
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**Approval and Administration:**

Regional Commissioner Activities Approval Signature ..... Date:.....			
Date recorded in Region Activity Meeting notes		Date MIS updated	
Signed copy returned to L3/candidate			