

APPENDIX 1: Personal Learning Plan Template

Data Privacy Statement: This form is used to collect information about you for the purpose of recording training progression, this is to be used by us at the Scouts. We do not share your personal data provided in this forms with any third parties. We take your personal data privacy seriously. The data you provide to us is securely stored in a membership database. For further detail please visit our Data Protection Policy here. We will keep the data we capture from this form for only as long as necessary before it is transferred onto the membership database. For further detail on our retention periods please visit our Data Protection Policy here.

Name:		Appointment:	Members	nip number:				
Group:	District:		County/Region/Area:		Training ac	lviser:		
Initial plan agreed (date):		Plan reviewed (date):	Date provisional appointment ends:		Sheet:		of	
Are you able	to take part ir	n training held at the weekends?	Yes No			М	T W	Т
Are you able	to take part ir	n training held in the evenings?	Yes No	If so, ple	ase state your availability	: 🔲		
Module number	Learning required Y/N	Proposed learning method	Planned completion date	Actual completion date	Validation methods	Planned validation completion date	Validation completion date	I raining Advi
		i by – Learner:	Training /	Adviser:				

Name:		Appointment:	Membership number:				Sheet:	of
Module number	Learning required Y/N	Proposed learning method	Planned completion date	Actual completion date	Validation methods	Planned validation completion date	Validation completion date	Training Adviser signature
Personal I	learning pla	n agreed by – Learner:		Traini	ing Adviser:			

Additional sheets should be copied and attached to the front sheet.