

DUKE OF EDINBURGH'S AWARD – EXPEDITION APPROVAL REQUEST – Part A

- 1. All Award Expeditions requires prior approval for the Council
- 2. Copies of this form must be Submitted 4 weeks prior to The venture to:-

Dave Horrocks and to D of E Development Officer
Adventure Scotland Ltd Lossiemouth Community Centre

Croft House Coulardbank Road
12 Croftside Lossiemouth
Aviemore Moray IV31 6JW
PH22 1QJ Tel 01343 813614

Tel. 01479 811411 Fax. 01479 811414 E-mail info@adventure-scotland.com

a copy will be forwarded by Adventure Scotland to the appropriate Council Officer and recommendation for approval will be sent to the Head of Establishment (copy to D of E Development Officer)

3. (a) FOR EXPEDITIONS TO WILD COUNTRY

The Award "Expedition Notification Form for the Ventures in Wild Country" (green print form) should be completed and sent to the appropriate Panel Secretary.

Part A of this form must be completed and submitted (para 2 above) together with a copy of the green form attached

(b) FOR EXPEDITIONS TO NORMAL COUNTRY

Part A and Part B of this form should be completed and submitted as above.

4. Map photocopies (1:50,000) or electronic Anquet Style Routes should be attached showing the route planned, indicating Start and Finish Points (and planned times), Campsite(s) (and time of planned arrival and departure), also any identified alternate or emergency routes.

Award Unit / Group						
Venture Area						
Date						
Expeditions	Exploration	Oth	ner Adventurous Project			
Bronze	Silver	Go	ld			
Practice Venture	Qualifying Venture					
Purpose of Venture						
i urpose of venture						
Unit Contact / Form Subm	nitted by:	Nominated Base Contact Person				
Usual Contact Tel. No.		Emergency Tel. No. (24 hrs)				
			,			
Supervisor(s)	Qualifications		Contact Telephone Numbers			

Risk Assessment & Supe	rvision Plan				
HAZARDS – Specific to the planned route	RISK – what might go wrong	briefings and your remote	as related to pre training, e supervision plan.		
Experience of Group Members (of special importance for Bronze & Silver Expeditions venturing over into Wild Country					
Wild Country Panel Contacted YES / NO / NA (delete as appropriate) Landowners Contacted (Name Contact)					
	oted and signed by the Assemb				
•	eted and signed by the Award ure meets the requirements of the I	-			
-	_	_			
	the implementation of such policies		etice in Adventure Activities") and this		
I confirm that all group members safely complete the Venture.	rs have sufficient experience and ha	ave received appropriate tra	ining to allow them to satisfactorily and		
I confirm that all equipment to	be used by group members will be	checked as suitable prior to	departure.		
Signed					
Head of Establishment Details:					
Name					
Address					
Telephone	Fax	E-r	nail		
Endorsement					
I confirm that I endorse the planned venture and authorise it pending a favourite report from the Council's advisors					
Signed	Head	of Establishment Da	te		

THIS FORM MUST BE SUBMITTED AT LEASE FOUR WEEKS PRIOR TO THE VENURE

(earlier please if assistance is required with Assessment)

Changes to the plans for the venture must be notifies promptly