Created: May 2010 Revised: 21 July 2018

## PATROL QUARTERMASTER

Name:	Patrol:	Starting Date:	Ending Date:
GENERAL INFORMATION			
Type: Term: Reports to:	Elected by members of the patrol 6 months Patrol Leader		
QUALIFICATIONS			
Age: Rank: Experience: Training:	None None None After becoming a First Class Scout, has	completed ILST	
SPECIFIC LEADERSHIP RE	SPONSIBILITIES		
<ul> <li>Keeps record</li> <li>Keeps record</li> <li>Makes sure p</li> <li>Issues patrol</li> <li>Makes sugge</li> <li>Works with th</li> <li>Sets the exan</li> </ul>	s on patrol equipment s of the beginning and ending patrol box i atrol equipment is in good working condit equipment and makes sure it is returned i stions for new or replacement items to the e Troop Quartermaster and Adult Equipm nple by wearing the uniform correctly ut Oath and Law	ion in good condition e Troop Quartermaster and Adult E	
<ul><li>Attend 75% o</li><li>Attend 75% o</li></ul>	These are expectations. A scout should f troop meetings f troop outings merit badges	d always strive to do their best.	
<ul> <li>Has complete</li> <li>Has complete</li> <li>Has ensured</li> <li>Has ensured</li> <li>Maintain patro</li> </ul>	MENTS: The below requirements are ties and responsibilities and beginning inventory list within 1 week of ed ending inventory list within 1 week of country that there are enough place settings for put that the supplies of the camp box is kept to equipment following each outing	ompleting office and turned in to that atrol members	ASPL
meetings when se	y being an active Scout. Be at least 15 n rvice patrol. You MUST call the Patrol L activity. You also need to make sure, wonsibilities.	eader if you are not going to be a	t a meeting or if you suddenly have to
SCOUT AGREEMENT: I have read the job of my ability. I furth	descriptions for this position. I understan ner understand that if I do not fulfill the res	d the duties, goals, and responsibi ponsibilities and requirements of t	lities and will carry them out to the best his job then I can be removed.
	Scout's signature	ə:	Date:
	EMENT: mmitment my scout is making. I promise to couragement at home. I realize that their		
	Parent's signature	e:	Date:
SCOUTMASTER'S AGREEM The Scoutmaster (	<b>MENT:</b> or designee) will provide feedback on sco	ut's leadership performance.	
	Scoutmaster's signature	e:	Date:
When the term is completed,	the Scoutmaster and Advancement Chair	ir approve of the time served: Dat	e/
Scoutmaster:	Advand	cement Chair:	