## Application Form: District/County/Area Youth Commissioner

|  |  |
| --- | --- |
| ...Please insert necessary GDPR statement here... | |
|  | |
| Name |  |
| Telephone number |  |
| Email address |  |
| Why would you be a good fit for the District/County/Area Youth Commissioner role? (refer to role description) | |
|  | |
| Why is being youth shaped in Scouts important to you? | |
|  | |
| What skills or experience could you bring to the role? (refer to the person specification) | |
|  | |
| Please return this form to: | Add details here |
| The closing date for receiving nominations is: | Add closing date here |