

TROOP 429

LEADERSHIP POSITION EVALUATION

Scouts Name: _____ Adviser Name: _____

Troop Position held: **SENIOR PATROL LEADER** Date You Started Position _____

Rate yourself in the following scouting areas (5 – Excellent, 4 – Very Good, 3 – Good, 2 Fair, 1 – Needs Improvement)

Attitude	<input type="checkbox"/>	Common Sense	<input type="checkbox"/>	Cooperation	<input type="checkbox"/>
Correct Uniform	<input type="checkbox"/>	Courtesy	<input type="checkbox"/>	Creativity	<input type="checkbox"/>
Dependability	<input type="checkbox"/>	Friendly	<input type="checkbox"/>	Initiative	<input type="checkbox"/>
Integrity	<input type="checkbox"/>	Leadership Ability	<input type="checkbox"/>	Loyalty	<input type="checkbox"/>
Punctuality	<input type="checkbox"/>	Reverent	<input type="checkbox"/>	Scout Spirit	<input type="checkbox"/>
Teamwork	<input type="checkbox"/>	Trustworthy	<input type="checkbox"/>	Work Ethic	<input type="checkbox"/>
Self Starter	<input type="checkbox"/>	Enthusiastic	<input type="checkbox"/>	Scout Skill	<input type="checkbox"/>
Lead a discussion group	<input type="checkbox"/>	Keep a group on schedule	<input type="checkbox"/>		
Make announcements in front of a large group	<input type="checkbox"/>	Develop Agenda for PLC	<input type="checkbox"/>		
Be a “coach” to others	<input type="checkbox"/>	Follow Troop Guidelines	<input type="checkbox"/>		
Communication with your Adviser	<input type="checkbox"/>	Communication with the Troop	<input type="checkbox"/>		
Communication with your ASPL	<input type="checkbox"/>	Delegate Task to Jr. Leaders	<input type="checkbox"/>		
Work with the Scoutmaster in training junior leaders	<input type="checkbox"/>				
Preside at all troop meetings, events, activities, and annual program planning conference.	<input type="checkbox"/>				
Work with Program Patrols for Troop Meeting Plans in advance (2 months out)	<input type="checkbox"/>				
Attendance at troop meetings, activities and outings.	<input type="checkbox"/>				

Evaluation Completed by: Adult _____ (Signature)
Scout _____ (Signature)

List two areas where you would like to improve over the next 3 months to be a more effective Troop leader. What actions are you going to take to make those improvements?

Adviser’s Comments: _____

TROOP 429

LEADERSHIP POSITION EVALUATION

Scouts Name: _____ Adviser Name: _____

Troop Position held: **ASST.SENIOR PATROL LEADER** Date You Started Position _____

Rate yourself in the following scouting areas (5 – Excellent, 4 – Very Good, 3 – Good, 2 Fair, 1 – Needs Improvement)

Attitude	<input type="checkbox"/>	Common Sense	<input type="checkbox"/>	Cooperation	<input type="checkbox"/>
Correct Uniform	<input type="checkbox"/>	Courtesy	<input type="checkbox"/>	Creativity	<input type="checkbox"/>
Dependability	<input type="checkbox"/>	Friendly	<input type="checkbox"/>	Initiative	<input type="checkbox"/>
Integrity	<input type="checkbox"/>	Leadership Ability	<input type="checkbox"/>	Loyalty	<input type="checkbox"/>
Punctuality	<input type="checkbox"/>	Reverent	<input type="checkbox"/>	Scout Spirit	<input type="checkbox"/>
Teamwork	<input type="checkbox"/>	Trustworthy	<input type="checkbox"/>	Work Ethic	<input type="checkbox"/>
Self Starter	<input type="checkbox"/>	Enthusiastic	<input type="checkbox"/>	Scout Skill	<input type="checkbox"/>
Lead a discussion group	<input type="checkbox"/>	Keep a group on schedule	<input type="checkbox"/>		
Make announcements in front of a large group	<input type="checkbox"/>	Follow Troop Guidelines	<input type="checkbox"/>		
Be a “coach” to others	<input type="checkbox"/>	Communication with your SPL	<input type="checkbox"/>		
Communication with your Adviser	<input type="checkbox"/>	Communication with the Troop	<input type="checkbox"/>		
Delegate Task to Jr. Leaders	<input type="checkbox"/>		<input type="checkbox"/>		
Steps forward in the absence of SPL or when asked by the SPL	<input type="checkbox"/>		<input type="checkbox"/>		
Training and giving direct leadership to: Historian, OA Troop Representative, Scribe, Librarian, Instructor, Quartermaster, Chaplain Aide	<input type="checkbox"/>		<input type="checkbox"/>		
Attendance at troop meetings, activities and outings.	<input type="checkbox"/>				

Evaluation Completed by: Adult _____ (Signature)
Scout _____ (Signature)

List two areas where you would like to improve over the next 3 months to be a more effective Troop leader. What actions are you going to take to make those improvements?

Adviser’s Comments: _____

TROOP 429

LEADERSHIP POSITION EVALUATION

Scouts Name: _____ Adviser Name: _____

Troop Position held: **PATROL LEADER** Date You Started Position _____

Rate yourself in the following scouting areas (5 – Excellent, 4 – Very Good, 3 – Good, 2 Fair, 1 – Needs Improvement)

Attitude	<input type="checkbox"/>	Common Sense	<input type="checkbox"/>	Cooperation	<input type="checkbox"/>
Correct Uniform	<input type="checkbox"/>	Courtesy	<input type="checkbox"/>	Creativity	<input type="checkbox"/>
Dependability	<input type="checkbox"/>	Friendly	<input type="checkbox"/>	Initiative	<input type="checkbox"/>
Integrity	<input type="checkbox"/>	Leadership Ability	<input type="checkbox"/>	Loyalty	<input type="checkbox"/>
Punctuality	<input type="checkbox"/>	Reverent	<input type="checkbox"/>	Scout Spirit	<input type="checkbox"/>
Teamwork	<input type="checkbox"/>	Trustworthy	<input type="checkbox"/>	Work Ethic	<input type="checkbox"/>
Self Starter	<input type="checkbox"/>	Enthusiastic	<input type="checkbox"/>	Scout Skill	<input type="checkbox"/>
Plan and lead patrol meetings and activities	<input type="checkbox"/>	Keep patrol schedule	<input type="checkbox"/>		
Make announcements in front of a large group	<input type="checkbox"/>	Monthly Patrol Meetings scheduled	<input type="checkbox"/>		
Be a “coach” to others	<input type="checkbox"/>	Follow Troop Guidelines	<input type="checkbox"/>		
Communication with your Adviser	<input type="checkbox"/>	Communication with the Troop	<input type="checkbox"/>		
Communication with your Patrol	<input type="checkbox"/>	Delegate Task to Patrol Members	<input type="checkbox"/>		
Assigns patrol jobs and assist in accomplishing their responsibilities: Asst. Patrol Leader, Scribe, Quartermaster, Grubmaster			<input type="checkbox"/>		
Encourage patrol member advancement and/or plan activities to assist in advancements			<input type="checkbox"/>		
Represent patrol at PLC and six (6) month planning	<input type="checkbox"/>	Prepare the patrol to take part in all troop activities	<input type="checkbox"/>		
Attendance at troop meetings, activities and outings	<input type="checkbox"/>				

Evaluation Completed by: Adult _____ (Signature)
Scout _____ (Signature)

List two areas where you would like to improve over the next 3 months to be a more effective Troop leader. What actions are you going to take to make those improvements?

Adviser’s Comments: _____

TROOP 429

LEADERSHIP POSITION EVALUATION

Scouts Name: _____ Adviser Name: _____

Troop Position held: **QUARTERMASTER** Date You Started Position: _____

Rate yourself in the following scouting areas (5 – Excellent, 4 – Very Good, 3 – Good, 2 Fair, 1 – Needs Improvement)

Attitude	<input type="checkbox"/>	Common Sense	<input type="checkbox"/>	Cooperation	<input type="checkbox"/>
Correct Uniform	<input type="checkbox"/>	Courtesy	<input type="checkbox"/>	Creativity	<input type="checkbox"/>
Dependability	<input type="checkbox"/>	Friendly	<input type="checkbox"/>	Initiative	<input type="checkbox"/>
Integrity	<input type="checkbox"/>	Leadership Ability	<input type="checkbox"/>	Loyalty	<input type="checkbox"/>
Punctuality	<input type="checkbox"/>	Reverent	<input type="checkbox"/>	Scout Spirit	<input type="checkbox"/>
Teamwork	<input type="checkbox"/>	Trustworthy	<input type="checkbox"/>	Work Ethic	<input type="checkbox"/>
Self Starter	<input type="checkbox"/>	Enthusiastic	<input type="checkbox"/>	Scout Skill	<input type="checkbox"/>
Keep records of patrol & troop equipment	<input type="checkbox"/>	Keep equipment in good repair	<input type="checkbox"/>		
Make announcements in front of a large group	<input type="checkbox"/>	Recheck trailer inventory after every campout	<input type="checkbox"/>		
Keep equipment storage area neat and clean	<input type="checkbox"/>	Suggest new or replacement items	<input type="checkbox"/>		
Communication with your Adviser	<input type="checkbox"/>	Communication with the Troop	<input type="checkbox"/>		
Communication with your ASPL	<input type="checkbox"/>	Create request forms	<input type="checkbox"/>		
Encourage patrols cleanliness and stocked cook box using friendly quarterly competition			<input type="checkbox"/>		
Attendance at troop meetings, activities and outings	<input type="checkbox"/>				

Evaluation Completed by: Adult _____ (Signature)
Scout _____ (Signature)

List two areas where you would like to improve over the next 3 months to be a more effective Troop leader. What actions are you going to take to make those improvements?

Adviser's Comments: _____

TROOP 429

LEADERSHIP POSITION EVALUATION

Scouts Name: _____ Adviser Name: _____

Troop Position held: **TROOP SCRIBE** Date You Started Position _____

Rate yourself in the following scouting areas (5 – Excellent, 4 – Very Good, 3 – Good, 2 – Fair, 1 – Needs Improvement)

Attitude	<input type="checkbox"/>	Common Sense	<input type="checkbox"/>	Cooperation	<input type="checkbox"/>
Correct Uniform	<input type="checkbox"/>	Courtesy	<input type="checkbox"/>	Creativity	<input type="checkbox"/>
Dependability	<input type="checkbox"/>	Friendly	<input type="checkbox"/>	Initiative	<input type="checkbox"/>
Integrity	<input type="checkbox"/>	Leadership Ability	<input type="checkbox"/>	Loyalty	<input type="checkbox"/>
Punctuality	<input type="checkbox"/>	Reverent	<input type="checkbox"/>	Scout Spirit	<input type="checkbox"/>
Teamwork	<input type="checkbox"/>	Trustworthy	<input type="checkbox"/>	Work Ethic	<input type="checkbox"/>
Self Starter	<input type="checkbox"/>	Enthusiastic	<input type="checkbox"/>	Scout Skill	<input type="checkbox"/>
Attend and keep a log of PLC meetings	<input type="checkbox"/>	Work closely with Patrol Scribes	<input type="checkbox"/>		
Make announcements in front of a large group	<input type="checkbox"/>	Follow Troop Guidelines	<input type="checkbox"/>		
Communication with your Adviser	<input type="checkbox"/>	Communication with the Troop	<input type="checkbox"/>		
Communication with your ASPL	<input type="checkbox"/>	Maintains Troop Mailbox	<input type="checkbox"/>		
Record attendance and dues payments of all troop members	<input type="checkbox"/>				
Communication with webmaster for website updates	<input type="checkbox"/>	Attendance at troop meetings, activities and outings	<input type="checkbox"/>		

Evaluation Completed by: Adult _____ (Signature)
Scout _____ (Signature)

List two areas where you would like to improve over the next 3 months to be a more effective Troop leader. What actions are you going to take to make those improvements?

Adviser's Comments: _____

TROOP 429

LEADERSHIP POSITION EVALUATION

Scouts Name: _____ Adviser Name: _____

Troop Position held: **HISTORIAN** Date You Started Position _____

Rate yourself in the following scouting areas (5 – Excellent, 4 – Very Good, 3 – Good, 2 Fair, 1 – Needs Improvement)

Attitude	<input type="checkbox"/>	Common Sense	<input type="checkbox"/>	Cooperation	<input type="checkbox"/>
Correct Uniform	<input type="checkbox"/>	Courtesy	<input type="checkbox"/>	Creativity	<input type="checkbox"/>
Dependability	<input type="checkbox"/>	Friendly	<input type="checkbox"/>	Initiative	<input type="checkbox"/>
Integrity	<input type="checkbox"/>	Leadership Ability	<input type="checkbox"/>	Loyalty	<input type="checkbox"/>
Punctuality	<input type="checkbox"/>	Reverent	<input type="checkbox"/>	Scout Spirit	<input type="checkbox"/>
Teamwork	<input type="checkbox"/>	Trustworthy	<input type="checkbox"/>	Work Ethic	<input type="checkbox"/>
Self Starter	<input type="checkbox"/>	Enthusiastic	<input type="checkbox"/>	Scout Skill	<input type="checkbox"/>
Keep a library of past outings for further reference	<input type="checkbox"/>	Keep information about troop alumni	<input type="checkbox"/>		
Make announcements in front of a large group	<input type="checkbox"/>	Follow Troop Guidelines	<input type="checkbox"/>		
Communication with your Adviser	<input type="checkbox"/>	Communication with the Troop	<input type="checkbox"/>		
Communication with your ASPL	<input type="checkbox"/>	Communication with program patrol	<input type="checkbox"/>		
Creation of Troop Scoop for COHs	<input type="checkbox"/>				
Attendance at troop meetings, activities and outings	<input type="checkbox"/>				
Gather pictures and facts about past activities of the troop and keep them in scrapbooks, wall displays, and information files			<input type="checkbox"/>		

Evaluation Completed by: Adult _____ (Signature)

Scout _____ (Signature)

List two areas where you would like to improve over the next 3 months to be a more effective Troop leader. What actions are you going to take to make those improvements?

Adviser's Comments: _____

TROOP 429

LEADERSHIP POSITION EVALUATION

Scouts Name: _____ Adviser Name: _____

Troop Position held: **LIBRARIAN** Date You Started Position _____

Rate yourself in the following scouting areas (5 – Excellent, 4 – Very Good, 3 – Good, 2 Fair, 1 – Needs Improvement)

Attitude	<input type="checkbox"/>	Common Sense	<input type="checkbox"/>	Cooperation	<input type="checkbox"/>
Correct Uniform	<input type="checkbox"/>	Courtesy	<input type="checkbox"/>	Creativity	<input type="checkbox"/>
Dependability	<input type="checkbox"/>	Friendly	<input type="checkbox"/>	Initiative	<input type="checkbox"/>
Integrity	<input type="checkbox"/>	Leadership Ability	<input type="checkbox"/>	Loyalty	<input type="checkbox"/>
Punctuality	<input type="checkbox"/>	Reverent	<input type="checkbox"/>	Scout Spirit	<input type="checkbox"/>
Teamwork	<input type="checkbox"/>	Trustworthy	<input type="checkbox"/>	Work Ethic	<input type="checkbox"/>
Self Starter	<input type="checkbox"/>	Enthusiastic	<input type="checkbox"/>	Scout Skill	<input type="checkbox"/>
Follow Troop Guidelines	<input type="checkbox"/>	Keep a list of merit badge counselors	<input type="checkbox"/>		
Make announcements in front of a large group	<input type="checkbox"/>	Keep records on literature owned by the troop	<input type="checkbox"/>		
Maintain a system to check literature in and out	<input type="checkbox"/>	Add new or replacement items as needed	<input type="checkbox"/>		
Communication with your Adviser	<input type="checkbox"/>	Communication with the Troop	<input type="checkbox"/>		
Communication with your ASPL	<input type="checkbox"/>	Attendance at troop meetings, activities and outings	<input type="checkbox"/>		
Have literature available for borrowing at troop meetings	<input type="checkbox"/>				

Evaluation Completed by: Adult _____ (Signature)
Scout _____ (Signature)

List two areas where you would like to improve over the next 3 months to be a more effective Troop leader. What actions are you going to take to make those improvements?

Adviser's Comments: _____

TROOP 429

LEADERSHIP POSITION EVALUATION

Scouts Name: _____ Adviser Name: _____

Troop Position held: **INSTRUCTOR** Date You Started Position _____

Rate yourself in the following scouting areas (5 – Excellent, 4 – Very Good, 3 – Good, 2 Fair, 1 – Needs Improvement)

Attitude	<input type="checkbox"/>	Common Sense	<input type="checkbox"/>	Cooperation	<input type="checkbox"/>
Correct Uniform	<input type="checkbox"/>	Courtesy	<input type="checkbox"/>	Creativity	<input type="checkbox"/>
Dependability	<input type="checkbox"/>	Friendly	<input type="checkbox"/>	Initiative	<input type="checkbox"/>
Integrity	<input type="checkbox"/>	Leadership Ability	<input type="checkbox"/>	Loyalty	<input type="checkbox"/>
Punctuality	<input type="checkbox"/>	Reverent	<input type="checkbox"/>	Scout Spirit	<input type="checkbox"/>
Teamwork	<input type="checkbox"/>	Trustworthy	<input type="checkbox"/>	Work Ethic	<input type="checkbox"/>
Self Starter	<input type="checkbox"/>	Enthusiastic	<input type="checkbox"/>	Scout Skill	<input type="checkbox"/>
Follow Troop Guidelines	<input type="checkbox"/>	Assist program patrol with suggestions	<input type="checkbox"/>		
Make announcements in front of a large group	<input type="checkbox"/>	Prepare in advance for each teaching assignment	<input type="checkbox"/>		
Communication with your ASPL	<input type="checkbox"/>	Communication with your Adviser	<input type="checkbox"/>		
Communication with the Troop	<input type="checkbox"/>				
Instruct scouting skills as needed within the troop or patrols	<input type="checkbox"/>				
.Attendance at troop meetings, activities and outings.	<input type="checkbox"/>				

Evaluation Completed by: Adult _____ (Signature)
Scout _____ (Signature)

List two areas where you would like to improve over the next 3 months to be a more effective Troop leader. What actions are you going to take to make those improvements?

Adviser's Comments: _____

TROOP 429

LEADERSHIP POSITION EVALUATION

Scouts Name: _____ Adviser Name: _____

Troop Position held: **CHAPLAIN AIDE** Date You Started Position _____

Rate yourself in the following scouting areas (5 – Excellent, 4 – Very Good, 3 – Good, 2 Fair, 1 – Needs Improvement)

Attitude	<input type="checkbox"/>	Common Sense	<input type="checkbox"/>	Cooperation	<input type="checkbox"/>
Correct Uniform	<input type="checkbox"/>	Courtesy	<input type="checkbox"/>	Creativity	<input type="checkbox"/>
Dependability	<input type="checkbox"/>	Friendly	<input type="checkbox"/>	Initiative	<input type="checkbox"/>
Integrity	<input type="checkbox"/>	Leadership Ability	<input type="checkbox"/>	Loyalty	<input type="checkbox"/>
Punctuality	<input type="checkbox"/>	Reverent	<input type="checkbox"/>	Scout Spirit	<input type="checkbox"/>
Teamwork	<input type="checkbox"/>	Trustworthy	<input type="checkbox"/>	Work Ethic	<input type="checkbox"/>
Self Starter	<input type="checkbox"/>	Enthusiastic	<input type="checkbox"/>	Scout Skill	<input type="checkbox"/>
Follow Troop Guidelines	<input type="checkbox"/>	Communication with your ASPL	<input type="checkbox"/>		
Make announcements in front of a large group	<input type="checkbox"/>	Keep records on literature owned by the troop	<input type="checkbox"/>		
Communication with your Adviser	<input type="checkbox"/>	Communication with the Troop	<input type="checkbox"/>		
Tell troop members about the religious emblems programs for their faith	<input type="checkbox"/>				
Lead "Interfaith Worship Service" services on campouts	<input type="checkbox"/>				
Keep troop leaders appraised of religious holidays when planning activities	<input type="checkbox"/>				
Encourage saying grace at meals while camping or on activities	<input type="checkbox"/>				
Attendance at troop meetings, activities and outings.	<input type="checkbox"/>				

Evaluation Completed by: Adult _____ (Signature)
Scout _____ (Signature)

List two areas where you would like to improve over the next 3 months to be a more effective Troop leader. What actions are you going to take to make those improvements?

Adviser's Comments: _____

TROOP 429

LEADERSHIP POSITION EVALUATION

Scouts Name: _____ Adviser Name: _____

Troop Position held: **TROOP GUIDE** Date You Started Position _____

Rate yourself in the following scouting areas (5 – Excellent, 4 – Very Good, 3 – Good, 2 Fair, 1 – Needs Improvement)

Attitude	<input type="checkbox"/>	Common Sense	<input type="checkbox"/>	Cooperation	<input type="checkbox"/>
Correct Uniform	<input type="checkbox"/>	Courtesy	<input type="checkbox"/>	Creativity	<input type="checkbox"/>
Dependability	<input type="checkbox"/>	Friendly	<input type="checkbox"/>	Initiative	<input type="checkbox"/>
Integrity	<input type="checkbox"/>	Leadership Ability	<input type="checkbox"/>	Loyalty	<input type="checkbox"/>
Punctuality	<input type="checkbox"/>	Reverent	<input type="checkbox"/>	Scout Spirit	<input type="checkbox"/>
Teamwork	<input type="checkbox"/>	Trustworthy	<input type="checkbox"/>	Work Ethic	<input type="checkbox"/>
Self Starter	<input type="checkbox"/>	Enthusiastic	<input type="checkbox"/>	Scout Skill	<input type="checkbox"/>
Follow Troop Guidelines	<input type="checkbox"/>	Communication with your ASPL	<input type="checkbox"/>		
Make announcements in front of a large group	<input type="checkbox"/>	Assist the Assistant Scoutmaster with training	<input type="checkbox"/>		
Communication with your Adviser	<input type="checkbox"/>	Communication with the Troop	<input type="checkbox"/>		
Guide new scouts through early Scouting activities	<input type="checkbox"/>				
Shield new scouts from harassment by older scouts	<input type="checkbox"/>				
Help new scouts earn the First Class rank in their first year	<input type="checkbox"/>				
Coach the patrol leader of the new-Scout patrol on his duties	<input type="checkbox"/>				
Work with the patrol leader at the PLC meetings	<input type="checkbox"/>				
Attendance at troop meetings, activities and outings	<input type="checkbox"/>				

Evaluation Completed by: Adult _____ (Signature)
Scout _____ (Signature)

List two areas where you would like to improve over the next 3 months to be a more effective Troop leader. What actions are you going to take to make those improvements?

Adviser's Comments: _____

TROOP 429

LEADERSHIP POSITION EVALUATION

Scouts Name: _____ Adviser Name: _____

Troop Position held: **OA REPRESENTATIVE** Date You Started Position _____

Rate yourself in the following scouting areas (5 – Excellent, 4 – Very Good, 3 – Good, 2 Fair, 1 – Needs Improvement)

Attitude	<input type="checkbox"/>	Common Sense	<input type="checkbox"/>	Cooperation	<input type="checkbox"/>
Correct Uniform	<input type="checkbox"/>	Courtesy	<input type="checkbox"/>	Creativity	<input type="checkbox"/>
Dependability	<input type="checkbox"/>	Friendly	<input type="checkbox"/>	Initiative	<input type="checkbox"/>
Integrity	<input type="checkbox"/>	Leadership Ability	<input type="checkbox"/>	Loyalty	<input type="checkbox"/>
Punctuality	<input type="checkbox"/>	Reverent	<input type="checkbox"/>	Scout Spirit	<input type="checkbox"/>
Teamwork	<input type="checkbox"/>	Trustworthy	<input type="checkbox"/>	Work Ethic	<input type="checkbox"/>
Self Starter	<input type="checkbox"/>	Enthusiastic	<input type="checkbox"/>	Scout Skill	<input type="checkbox"/>
Follow Troop Guidelines	<input type="checkbox"/>	Communication with your ASPL	<input type="checkbox"/>		
Make announcements in front of a large group	<input type="checkbox"/>	Communication with the Troop	<input type="checkbox"/>		
Communication with your Adviser	<input type="checkbox"/>				
Serve as a communication link between the lodge or chapter and the troop			<input type="checkbox"/>		
Encourage Scouts to actively participate in community service projects			<input type="checkbox"/>		
Encourage year-round and resident camping in the troop			<input type="checkbox"/>		
Assist with leadership skills training in the troop			<input type="checkbox"/>		
Encourage Arrowmen in the troop to be active participants in lodge and/or chapter activities and to seal their membership in the Order by becoming Brotherhood members			<input type="checkbox"/>		
Attendance at troop meetings, activities and outings			<input type="checkbox"/>		

Evaluation Completed by: Adult _____ (Signature)
Scout _____ (Signature)

List two areas where you would like to improve over the next 3 months to be a more effective Troop leader. What actions are you going to take to make those improvements?

Adviser's Comments: _____

TROOP 429

LEADERSHIP POSITION EVALUATION

Scouts Name: _____ Adviser Name: _____

Troop Position held: **DEN CHIEF** Date You Started Position _____

Rate yourself in the following scouting areas (5 – Excellent, 4 – Very Good, 3 – Good, 2 Fair, 1 – Needs Improvement)

Attitude	<input type="checkbox"/>	Common Sense	<input type="checkbox"/>	Cooperation	<input type="checkbox"/>
Correct Uniform	<input type="checkbox"/>	Courtesy	<input type="checkbox"/>	Creativity	<input type="checkbox"/>
Dependability	<input type="checkbox"/>	Friendly	<input type="checkbox"/>	Initiative	<input type="checkbox"/>
Integrity	<input type="checkbox"/>	Leadership Ability	<input type="checkbox"/>	Loyalty	<input type="checkbox"/>
Punctuality	<input type="checkbox"/>	Reverent	<input type="checkbox"/>	Scout Spirit	<input type="checkbox"/>
Teamwork	<input type="checkbox"/>	Trustworthy	<input type="checkbox"/>	Work Ethic	<input type="checkbox"/>
Self Starter	<input type="checkbox"/>	Enthusiastic	<input type="checkbox"/>	Scout Skill	<input type="checkbox"/>
Plan and lead den activities	<input type="checkbox"/>	Help prepare boys for Boy Scouts	<input type="checkbox"/>		
Make announcements in front of a large group	<input type="checkbox"/>	Monthly Patrol Meetings scheduled	<input type="checkbox"/>		
Be a “coach” to others	<input type="checkbox"/>	Follow Troop Guidelines	<input type="checkbox"/>		
Communication with your Adviser	<input type="checkbox"/>	Communication with the Den Leader	<input type="checkbox"/>		
Attendance at troop meetings, activities and outings	<input type="checkbox"/>				

Evaluation Completed by: Adult _____ (Signature)

Scout _____ (Signature)

List two areas where you would like to improve over the next 3 months to be a more effective Troop leader. What actions are you going to take to make those improvements?

Adviser’s Comments: _____
