

Derbyshire County Scouts

DofE Expedition Notification Form



Please print in CAPITALS or type details in. Complete as fully as possible.

Notification of Expedition

Notification of ALL expeditions (Practice and Qualifying) **must be sent to the County DofE Advisor** <u>at least 6 weeks before the expedition</u> takes place using this Derbyshire Scouts notification Form. The expedition is **NOT approved** until given a number and signed by the DofE advisor. A copy of Route cards and Risk Assessment **must be included** with this notification.

For Qualifying Expeditions full details and a tracing of the route should be sent to the Assessor a minimum of two weeks before.

A NAN form must be sent to your DLV and copied with this notification.

Information is used in case of any queries or incidents either from members of the public, emergency services or within Scouts.

It is also used to assist in securing Assessors (where needed) and offering spare places to others.

General Information

Explorer/Network				District:				
Unit:					2.00.00			
Leader					Contact			
Name:				Number:				
District Lead Volunteer		r				DL	LV Notified NAN form?	
name:						Y/I	′N):	
Risk Assessment attached		ched			Mode of Travel:			
(Y/N)				Mode of Havet.		ι.		
Team Name:								

Location of Expedition:								
Expedition Team Goal:								
Start Date:				Finish Date:				
Practice or Qualifying:		Practice / Qualifying		Level: Bronze / Silver		er/G	Gold	
Supervisor:					Contac	t Number:		
Scout Adventurous Activity Permit Level:						NAP Level:		
Assessor Name:			DofE	EAAS Nu	umber (NOA):			

Team Information

Team Member Names	eDofE ID	DOB	Date 1 st Aid training
*			

* - only used for tandem expeditions - eg cycling/canoeing



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Expedition Information

Location	Description	OS Grid Ref	Time and Date
Departing from *			
Expedition Start point			
Camp 1			
Camp 2			
Camp 3			
Expedition Finish point			
Returning to *			

*If providing transport to/from expedition area.

Adult Help Information

Supervisor/Assessor/Adult Helper Name & Role	Mobile	Accreditation #

Notification

If the form is submitted electronically, please type your name and enter 'email' into the signature box.

Declaration of Party Leader

I confirm that I have read and will comply with the requirements of:

- a) the relevant sections of POR.
- b) DofE Expedition Requirements

I am an Approved Expedition Supervisor / Assessor / Leader (delete as appropriate)

Print Name	Signature	Date

Please return completed form to County Advisor Team - Duke of Edinburgh's Award **at least 6 weeks prior**.

Email to dofe@derbyshirescouts.org

For County DofE Advisor use only:

Date Received:	Who:	Approval #:
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