



PROGRAM CAPABILITY INVENTORY

INSTRUCTIONS:

Each year our Venturers need adult volunteers to serve as Advisors, program consultants, and helpers with transportation, chaperoning, counseling, and planning.

We would like to know in which areas of interests, hobbies, or contacts you would be willing to help our Venturers.

If the Crew decides to call on you for help, an appointment will be made with you well in advance.

Thank you for your willingness to assist our Venturers and please return this PCI form to:

(Please Complete)

Date: _____

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone (home): _____ (business): _____

Occupation: _____ E-mail Address: _____

Yes! I would be willing to help in the areas designated below:

- | | | | | |
|--------------------------------------|-------------------------------------|---|--|---------------------------------------|
| <input type="checkbox"/> Backpacking | <input type="checkbox"/> COACHING | <input type="checkbox"/> Fishing | <input type="checkbox"/> Photography | <input type="checkbox"/> Softball |
| <input type="checkbox"/> Basketball | <input type="checkbox"/> Cooking | <input type="checkbox"/> Marksmanship | <input type="checkbox"/> PROMOTING | <input type="checkbox"/> Swimming |
| <input type="checkbox"/> Bicycling | <input type="checkbox"/> COUNSELING | <input type="checkbox"/> Mountaineering | <input type="checkbox"/> Public Speaking | <input type="checkbox"/> TRAINING |
| <input type="checkbox"/> Bowling | <input type="checkbox"/> CREATING | <input type="checkbox"/> ORGANIZING | <input type="checkbox"/> Sailing | <input type="checkbox"/> Water Skiing |
| <input type="checkbox"/> Camping | <input type="checkbox"/> Diving | <input type="checkbox"/> Orienteering | <input type="checkbox"/> Scuba Diving | <input type="checkbox"/> Other |
| <input type="checkbox"/> Caving | <input type="checkbox"/> Equestrian | <input type="checkbox"/> Outdoor Living | <input type="checkbox"/> Shooting | |
| <input type="checkbox"/> Canoeing | <input type="checkbox"/> First Aid | <input type="checkbox"/> History | <input type="checkbox"/> Snow Skiing | |

MEMBERSHIPS

Please list your clubs, associations, fraternal groups, etc.:

CONTACTS

Please list people that you would be willing to ask to share their careers, hobbies, or skills:

SPECIAL PROGRAM ASSISTANCE

- I have a station wagon ___ van ___ or truck ___ .
- I have a workshop.
- I have family camping gear ___ RV ___ or pop-up camper ___.
- I can make contacts for special trips and activities.
- I have access to a cottage ___ or camping property ___.
- I have access to a boat ___ or airplane ___.

- I can help with leadership skills.
- I can help with _____
(Career information)
- I can help with _____
(Vocational information)
- I can help with community service projects.
- I can help with fund-raising projects.