

KENTUCKY-TENNESSEE CONFERENCE PATHFINDER

TLT PROGRAM POLICY

Kentucky-Tennessee TLT program:

1. Is for those in grades 9-12 who wish to advance into leadership positions.
2. Is optional, and some teen Pathfinders may not choose to take part.

Requirements for Application

- A. Be in grades 9-12, and submit application which has been:
 - a. Processed and signed by the sponsoring Pathfinder Club Director
 - b. Recommended by the church pastor
 - c. Registered with the Conference Pathfinder Director
- B. If in the 9th grade, the applicant must have been a Pathfinder with the local club during the previous year with 80% attendance and have completed an AY class during the most recent active year. If in the 10th, 11th, or 12th grade, the applicant must complete a club orientation program.
- C. Application to be renewed, registered, and accepted annually
- D. Actively participate in leadership skill development assignments
- E. Personality traits promoted by Christian ethics and the TLT pledge must be an integral part of the participant's lifestyle.

Procedures

1. Complete TLT application form
2. Obtain three (3) recommendations to be turned in to the Pathfinder club director at least 2 weeks before the beginning of the local club quarter or year.
 - a. One from a pastor
 - b. One from a teacher
 - c. One from a Pathfinder staff person

Acceptance

1. Each club will obtain a TLT manual and establish its own acceptance and application committee. The TLT's commitment to Pathfinding, maturity level, and Christian witness should be considered in addition to the application and recommendations.
2. Submit the application to the Conference Pathfinder Director for processing and final acceptance.
3. A red and black shoulder cord can be issued to the applicant upon acceptance to the program.
4. **ALL** new TLT's start at Level 1.

Year End Operational Report

1. Submit, to the Conference Pathfinder Director, a copy of the Operational Evaluation form for each assignment completed during the year. All tasks are to be completed on a rotational basis (one or two a year as needed).
 - a. Administrative Operations
 - b. AY Classwork/Honors Operations
 - c. Outreach Operations
 - d. Camping/Activity Operations
 - e. Counseling Operations
 - f. Financial/Clerical Operations



Keep a copy of all forms and applications for club purposes then mail, fax, or email a scanned copy to:

KYTN Youth Dept. P.O. Box 1088 Goodlettsville, TN 37070-1088
Fax: (615) 859-2120, Email: youth@kytn.net



KENTUCKY-TENNESSEE CONFERENCE PATHFINDER

TLT PROGRAM APPLICATION

NAME OF PATHFINDER CLUB: _____

APPLICANT'S NAME: _____

STREET ADDRESS: _____

CITY: _____ STATE: _____ HOME PHONE: _____

DATE OF BIRTH: _____ ARE YOU BAPTISED? ____ No ____ Yes

RELIGION: _____ CHURCH: _____

NAME OF SCHOOL NOW ATTENDING: _____

SCHOOL PHONE: _____ GRADE: _____

Check each class for which you have been invested:

- | | | | |
|---------------------------------------|--|----------------------------------|--|
| <input type="checkbox"/> Friend | <input type="checkbox"/> Trail Friend | <input type="checkbox"/> Ranger | <input type="checkbox"/> Wilderness Ranger |
| <input type="checkbox"/> Companion | <input type="checkbox"/> Trail Companion | <input type="checkbox"/> Voyager | <input type="checkbox"/> Frontier Voyager |
| <input type="checkbox"/> Explorer | <input type="checkbox"/> Wilderness Explorer | <input type="checkbox"/> Guide | <input type="checkbox"/> Frontier Guide |
| <input type="checkbox"/> Master Guide | | | |

NUMBER OF YEARS YOU HAVE BEEN IN ANY PATHFINDER CLUB: _____

I have read the requirements for the TLT program and will, to the best of my ability uphold the standards of the Pathfinder Club and the TLT program.

Signed: _____

I certify that the above named applicant is

- ☐ an acting Pathfinder counselor
- ☐ has met the requirements to become a _____
- ☐ is a newly baptized member of the SDA church.
- ☐ has the pastor's recommendation for the TLT Program.

Club Director Signed: _____

Date: _____



KENTUCKY-TENNESSEE CONFERENCE PATHFINDER

TLT APPLICANT RECOMMENDATION

I, the undersigned, am applying to the _____ club leadership for a position in the TLT Program of Pathfinding of the Kentucky-Tennessee Conference. I understand that my application and future participation are evaluated on my performance in Pathfinding and my adherence to the TLT Pledge as well as the Pathfinder Pledge and Law. I agree to participate in the TLT Program as outlined in the TLT Manual and commit myself to developing my Christian leadership potential to its fullest.

Please complete this recommendation and return it to the following:

Pathfinder Club Director's Name _____

Address _____ City _____ Zip _____

Thank you for your honest evaluation. Please keep me and the Pathfinder program in your prayers.

Signature _____ Date _____

APPLICANT SIGNATURE

Please answer the following questions. Respondent's Name _____

How do you know the applicant and for how long? _____

What qualities does the applicant bring to the program? _____

How does the applicant relate to people? _____

How does the applicant respond to stress? _____

Does the applicant have any problems that might hinder his/her participation? _____



KENTUCKY-TENNESSEE CONFERENCE PATHFINDER

TLT APPLICANT RECOMMENDATION

I, the undersigned, am applying to the_____ club leadership for a position in the TLT Program of Pathfinding of the Kentucky-Tennessee Conference. I understand that my application and future participation are evaluated on my performance in Pathfinding and my adherence to the TLT Pledge as well as the Pathfinder Pledge and Law. I agree to participate in the TLT Program as outlined in the TLT Manual and commit myself to developing my Christian leadership potential to its fullest.

Please complete this recommendation and return it to the following:

Pathfinder Club Director’s Name _____

Address _____ City _____ Zip _____

Thank you for your honest evaluation. Please keep me and the Pathfinder program in your prayers.

Signature _____ Date _____

APPLICANT SIGNATURE

Please answer the following questions. Respondent’s Name _____

How do you know the applicant and for how long? _____

What qualities does the applicant bring to the program? _____

How does the applicant relate to people? _____

How does the applicant respond to stress? _____

Does the applicant have any problems that might hinder his/her participation? _____



KENTUCKY-TENNESSEE CONFERENCE PATHFINDER

TLT APPLICANT RECOMMENDATION

I, the undersigned, am applying to the _____ club leadership for a position in the TLT Program of Pathfinding of the Kentucky-Tennessee Conference. I understand that my application and future participation are evaluated on my performance in Pathfinding and my adherence to the TLT Pledge as well as the Pathfinder Pledge and Law. I agree to participate in the TLT Program as outlined in the TLT Manual and commit myself to developing my Christian leadership potential to its fullest.

Please complete this recommendation and return it to the following:

Pathfinder Club Director's Name _____

Address _____ City _____ Zip _____

Thank you for your honest evaluation. Please keep me and the Pathfinder program in your prayers.

Signature _____ Date _____

APPLICANT SIGNATURE

Please answer the following questions. Respondent's Name _____

How do you know the applicant and for how long? _____

What qualities does the applicant bring to the program? _____

How does the applicant relate to people? _____

How does the applicant respond to stress? _____

Does the applicant have any problems that might hinder his/her participation? _____