**Name: Matthew Ballance Wood Badge Ticket Goal:**  2 of 5

**MY Scouting Position: Unit Commissioner**

**Team That Will Benefit From My Leadership: District Scouters**

**SMART Goal** *(Specific, Measurable, Attainable, Relevant and Timely):*

* **Specific**
* **Measurable**
* **Attainable**
* **Relevant**
* **Timely**

**WHO** (*Person/s or group/s who will be affected by this goal)***:**

* Unit committee members, unit committee chairpersons, unit leadership

**WHAT** (*A brief description of the action you plan to take to help make your vision a reality)***:**

* Develop a roundtable presentation on the “paperwork side of scouting”

**WHERE** (*Setting or locations for the action item work)***:**

* District roundtable meeting

**WHEN** (*Time-frame for the action item work)***:**

All work to be completed no later than 12 months from the start of the ticket

**HOW** (*Describe the steps you will take to complete this action item. Details and descriptions should reflect the SMART guideline)*:

* A lesson plan will be developed to explain the administration side of scouting.
* Copies of required forms will be provided with sample data entered
* Help sheets for online forms will be developed to give examples of where data is entered
* Visual Aids for use in the presentation (displaying screen-shots, paperwork examples, and/or reference cards) will be developed

**WHY (***Tell why this action item is important to you and how it relates to your vision for your group)***:**

This helps create program excellence by ensuring that units are accurately filing required documentation for their units on schedule. This will help to lead to consistency in how units provide their information to the council.

**HOW VERIFIED** (*Describe how you and your troop guide will know when this action item is completed)***:**

Review and inspection of the following items by my ticket counselor:

* Obtain course approval from District Training Chair
* Content review by District Training Chair
* Training will be delivered to the unit positions responsible

**Ticket Counselor Approval:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_