

Rock: Level 2 Caving- horizontal

Applicant Details:

Name:	Date of birth:
Scout Formation and Group:	Member number:
Email address:	Phone contact:

item	Skill	Date of demonstration	verifier initials
Age range	The candidate is of Venturer age or above		
Pre-requ	The candidate meets all of the requirements of Level 1 Caving Horizontal.	Attainment date	
Equipment	Demonstrate the correct care and maintenance of personal equipment.		
	Discuss the importance of and describe the processes involved in the logging of equipment usage.		
Navigat'n	Demonstrate the ability to competently interpret cave maps and navigate in cave systems.		
Weather	Demonstrate an understanding of the effects weather has on this activity		
	Interpret 2 different weather forecasts and explain how they will affect this activity and if necessary, any precautions that need to be taken.		
Environment	Demonstrate an understanding of minimal impact practices applicable to this activity.		
Specific Skills	Demonstrate knowledge of cave formations		
	Explain how a 'Munter Hitch' or equivalent, could be used in an emergency and understand the dangers of doing so.		
	Select and demonstrate the use of a handline		
Leadership	Plan, manage and lead a horizontal caving activity under the direct supervision of a suitably qualified leader in two different horizontal caves for a total of at least 5 hours. <i>Comments:</i>		

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Emergencies	Discuss entrapment, and ways of managing the person.		
	State at least nine different situations in this activity that could be classified as an emergency and what you would do.		
First Aid	Demonstrate an understanding of: <ul style="list-style-type: none"> a) How to approach an unconscious patient. b) How to identify if the patient is breathing. c) How to place a patient in the recovery position. d) The difference between venous and arterial bleeding. e) How to control all forms of external bleeding. f) Describe the risks of, and demonstrate the treatment for, foul air. OR		
	If over (and upon reaching) 15 years of age hold 'Apply first aid' (HLTFA301B) or equivalent. Type: _____ Number: _____	Expiry date	Certified Copy
Log Book	Present personal log book with relevant entries and trip reports on at least five caves visited and at least 20 hours underground in horizontal caving systems.		

I verify that all documentation and evidence given to support the above is true and correct. Candidate's Name: signature:	I verify that the participant has demonstrated or provided evidence to demonstrate the above requirements. Level 3 verifier: name..... signature:..... Date:
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Approval and Administration:

Regional Commissioner Activities Approval			
Signature		Date:.....	
Date recorded in Region		Date MIS updated	
Activity Meeting notes			
Signed copy returned to L3/candidate			