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| **giglio_leggero** **AGESCI**  Associazione Guide e Scouts Cattolici Italiani Formazione Capi Richiesta di  **NOMINA A CAPO**  nomine   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | La Comunità Capi del Gruppo Agesci | | | | | | | | | |  | | | | | | | | | | | | | Chiede la Nomina a Capo di | | | | | | | |  | | | | | | | | | | | | | | | Cognome | |  | | | | | | | | | | Nome | |  | | | | | | | | | Nat |  | a | |  | | | | | | | il | |  | | | Stato civile | |  | | | | | Abitante a | | |  | | |  | | | | | | | | | | | | | |  | | |  | | | cap | | | città | | | | | | | | | | | | | | prov | | | Via/Piazza | | |  | | | | | | | | | | | | | | | | nr | |  | | tel |  | | | | | | cell | |  | | | | | | email | |  | | | | | | Studi o lavoro attuale | | | | |  | | | | | | | | | | | | | | | | |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | | Codice Personale  (da rilevare dal censimento o dal tesserino) |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | |  | | --- | | **Riservato alla Segreteria Centrale** |  |  |  |  | | --- | --- | --- | | Nomina a Capo nr. | |  | | Data |  | | |  | Protocollo | |

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| |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | **VITA SCOUT** | | È membro dell’Associazione dall’anno | | | | | | |  | | Lupetto-Coccinella | | | dall’anno | |  | all’anno |  | | | | Esploratore-Guida | | | dall’anno | |  | all’anno |  | | | | Rover-Scolta | | | dall’anno | |  | all’anno |  | | | | Partenza nell’anno |  | | | Ingresso in Comunità Capi nell’anno | | | |  | | |

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| **ESPERIENZA DI SERVIZIO (ho svolto il servizio di)**   |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | | Aiuto Capo in Branca | |  |  |  | |  |  | |  | | branca |  | anno | |  | anno | | Aiuto Capo in Branca | |  |  |  | |  |  | | Capo Unità | |  |  |  | |  |  | | Capo Unità | |  |  |  | |  |  | | Servizio attuale |  | | | | | | | | Altre esperienze di servizio associativo dopo ingresso in Co.Ca. | | | | |  | | | |  | | | | | | | | | anno | | | | | | |  | |

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| **IL MIO ITER DI FORMAZIONE (allegare le valutazioni)**   |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | **C**ampo di **F**ormazione **T**irocinanti | | | | | | | | | | | | Luogo |  | Mese/anno | | | |  | | | | | | **C**ampo di **A**dulti provenienza **EX**tra assoc.va | | | | | | | | | | | | Luogo |  | Mese/anno | | | |  | | | | | |  | | | |  |  | |  |  |  |  | | **C**ampo di **F**ormazione **M**etodologica | | | |  | L/C | |  | E/G |  | R/S | | Luogo |  | | Mese/anno | | |  | | | | | |  | | | | | | | | | | | | **C**ampo di **F**ormazione **A**ssociativa | | | | | | | | | | | | Luogo |  | Mese/anno | | | |  | | | | | |  | | | |  |  | |  |  |  |  | | **C**ampo di **A**ggiornamento **M**etodologico | | | |  | L/C | |  | E/G |  | R/S | | Luogo |  | | Mese/anno | | |  | | | | | |

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| **Incontri ed eventi formativi associativi, articolo 59 regolamento AGESCI**  (ti ricordiamo che “*è prevista come necessaria la partecipazione ad eventi ed incontri formativi organizzati dai diversi livelli associativi e aventi attinenza con gli obiettivi del progetto del capo*”)   |  |  |  |  | | --- | --- | --- | --- | | Tipo evento |  | Organizzato da |  | | Tema |  | Mese e anno | / | | Tipo evento |  | Organizzato da |  | | Tema |  | Mese e anno | / | | Tipo evento |  | Organizzato da |  | | Tema |  | Mese e anno | / | | Tipo evento |  | Organizzato da |  | | Tema |  | Mese e anno | / |   Occasioni formative esterne, art.62 regolamento AGESCI:   |  |  |  |  | | --- | --- | --- | --- | | Tipo esperienza |  | Organizzato da |  | | Argomento |  | Mese e anno | / | |

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| **PRESENTAZIONE della Comunità Capi:**  La **Comunità Capi**, dopo essersi confrontata, valuta il percorso dall’ingresso in co.ca. ad oggi considerando:   * L’adesione alle scelte del Patto Associativo; * L’attitudine a sentirsi membro attivo della Chiesa e dell’Associazione; * La tensione alla formazione: campi scuola (i contenuti, le esperienze, la valutazione, ecc.), e altre occasioni di formazione permanente; * La capacità di collaborare con lo Staff e la Co.Ca.; * La competenza metodologica, l’intenzionalità educativa, la relazione educativa; * La continuità nel servizio ed i progetti per il futuro.  |  | | --- | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | **La Capo Gruppo** | |  | | | | | firma | |  | | Tel. |  | | Cell. | |  | e-mail | |  | | | **Il Capo Gruppo** | |  | | | | | firma | |  | | Tel. |  | | Cell. | |  | e-mail | |  | | | **L’Assistente Ecclesiastico** | | | |  | | | firma | |  | | Tel. |  | | Cell. | |  | e-mail | |  | |  |  |  |  |  | | --- | --- | --- | --- | | **Questa sezione è stata compilata il:** |  |  |  | | compilare obbligatoriamente | giorno | mese | anno | |
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