

PERSONAL PROGRESS			
<input type="checkbox"/> FAITH <input type="checkbox"/> DN <input type="checkbox"/> IW <input type="checkbox"/> KN	<input type="checkbox"/> C&A <input type="checkbox"/> GW <input type="checkbox"/> I <input type="checkbox"/> V	ARISE AND <h1>SHINE</h1> FORTH	DATE:
NAME:			
EXPERIENCE DETAILS:			
LEADER SIGNATURE:			

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