

Return to Service Center by:  
March 31, 2006

# 2006

Return to Service Center by:  
March 31, 2006

Ore-Ida Council

Boy Scouts of America

## Silver



## Beaver

### Nomination Form

- ❖ COMPLETE THIS FORM WITH AS MUCH DETAIL AS POSSIBLE.
- ❖ ADDITIONAL WRITTEN SUPPORTIVE MATERIALS OR LETTERS ARE ACCEPTED.
- ❖ APPLICATION SHOULD NOT BE SHARED OR DISCUSSED WITH OR SUBMITTED BY NOMINEE.

Registered in District # \_\_\_\_\_

Full Name (please print) \_\_\_\_\_

Address \_\_\_\_\_

City/State \_\_\_\_\_

Zip Code \_\_\_\_\_

Phone No. Occupation \_\_\_\_\_

Age \_\_\_\_\_

Current Registered Scouting Position(s) 1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

Unit Number (if applicable):

#### SERVICE THROUGH SCOUTING

Adult Scouting Leadership Positions Held:

Position

Dates

Position

Dates

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Total Number of Years Registered as an Adult Leader

Scouting Leader Training Courses completed

Course

Year

Course

Year

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Chairman, Silver Beaver Award Committee

Scout Executive

**ADULT SCOUT RECOGNITION AND HONORS RECEIVED:**

<u>Recognition</u>	<u>Date</u>	<u>Recognition</u>	<u>Date</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

**SERVICE RENDERED OUTSIDE THE SCOUTING PROGRAM**

**ADULT SERVICE RENDERED TO CHURCH, COMMUNITY, EDUCATIONAL BUSINESS, PROFESSIONAL, CIVIC, FRATERNAL, MILITARY, OR SERVICE OTHER THAN SCOUTING:**

<u>Organization</u>	<u>Position Held</u>	<u>Length of Service</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

**RECOGNITION AND HONORS OR AWARDS RECEIVED**

_____	_____
_____	_____
_____	_____

**LIST STATEMENTS OF NOTEWORTHY SERVICE OF EXCEPTIONAL CHARACTER TO YOUTH IN THIS COUNCIL AREA WHICH PROMPTS THIS RECOMMENDATION FOR THIS HIGH AWARD.**

Submitted by: \_\_\_\_\_ Phone \_\_\_\_\_

Address: \_\_\_\_\_ City/State/Zip \_\_\_\_\_