

SILVER BEAVER AWARD

*****NOTE: Submit ONLY this form – No additional letters or forms will be considered.*****

THE AWARD'S PURPOSE

To recognize adult Scouters and community citizens for devoted service to Scouting and youth.

PRESENTATION

At the 2020 Council Recognition Night in the spring.

ELIGIBILITY REQUIREMENTS

To be considered for the Silver Beaver Award, the nominee **MUST** have:

1. At least 10 or more years registered of adult service (with 5 or more in the Grand Teton Council).
2. Have rendered distinguished service as a Scouting volunteer.

The application should not be shared with, discussed with, or submitted by nominee. Please be as complete and discreet as possible. The amount of information provided is critical to the selection process. (Please print clearly.)

Full Name: _____ Occupation: _____ Age: _____ Phone(s): _____

Address: _____ City: _____ State: _____ Zip: _____

Nominee's e-mail address: _____

Currently registered in: _____ District. Scouting positions(s): _____

ADULT SCOUTING LEADERSHIP POSITIONS HELD:

<u>Position</u>	<u>Year</u>	<u>Position</u>	<u>Year</u>	<u>Position</u>	<u>Year</u>
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

TOTAL Number of Years as an ADULT LEADER:

SCOUTING LEADER TRAINING COURSES COMPLETED:

<u>Position</u>	<u>Year</u>	<u>Position</u>	<u>Year</u>	<u>Position</u>	<u>Year</u>
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

YOU MUST COMPLETE THE BACK SIDE OF THIS NOMINATION FORM

