



BOY SCOUTS OF AMERICA



GIRL SCOUTS

2017

DEPARTMENT OF PENNSYLVANIA
SCOUTER-OF-THE-YEAR APPLICATION

I. AWARD INFORMATION

- A. APPLICANT MUST BE REGISTERED AS EITHER A BOY SCOUT OR GIRL SCOUT LEADER.
- B. Recipient will receive a certificate.
- C. One award will be presented per American Legion district unless the district is served by more than one Scout Council.
- D. A cover letter from the Department of Pennsylvania will be mailed to the recipient advising the recipient of their selection for the award. Award will be presented by the District Commander at an appropriate ceremony.
- E. Local posts are encouraged to recognize the recipient.
- F. **APPLICATIONS MUST BE SUBMITTED TO DEPARTMENT HEADQUARTERS BEFORE:**
MARCH 1, 2017
- G. **RETURN TO:**
THE AMERICAN LEGION
DEPARTMENT OF PENNSYLVANIA
P.O. BOX 2324
HARRISBURG, PENNSYLVANIA 17105-2324

II. APPLICATION (PLEASE PRINT/USE ADDITIONAL SHEETS IF NECESSARY)

A. PERSONAL INFORMATION:

NAME: _____ TELEPHONE: (____) _____
 ADDRESS: _____
 CITY: _____ STATE: _____ ZIP: _____
 OCCUPATION: _____
 EMPLOYER: _____
 WORK ADDRESS: _____
 WORK TELEPHONE: (____) _____

B. RECOMMENDING AMERICAN LEGION POST/DISTRICT INFORMATION

POST NUMBER: _____ POST NAME: _____
 CITY: _____ STATE: _____
 LEGION DISTRICT NUMBER: _____ SECTION (CIRCLE): *Eastern Central Western*

LOCAL AMERICAN LEGION POST COMMANDER
OR ADJUTANT'S CERTIFICATION:

 TITLE: _____ (SIGNATURE REQUIRED) DATE: _____

AMERICAN LEGION DISTRICT REPRESENTATIVE CERTIFICATION:

 TITLE: _____ (SIGNATURE REQUIRED) DATE: _____

C. LIST COMMUNITY ACTIVITIES: _____

D. LIST COMMUNITY AWARDS/RECOGNITIONS: _____

E. **SCOUTING BACKGROUND INFORMATION** (Attach additional sheets if necessary)

NUMBER OF YEARS IN SCOUTING: YOUTH: _____ ADULT: _____
SCOUTING POSITIONS HELD AS YOUTH: _____

HIGHEST RANK ATTAINED AS YOUTH: _____
SIGNIFICANT SCOUTING ACCOMPLISHMENTS AS A YOUTH: _____

CURRENT PRIMARY ADULT SCOUTER POSITION: _____
OTHER ADULT SCOUTER POSITIONS HELD: _____

ADULT AWARDS RECEIVED: _____

ADULT TRAINING EXPERIENCES: _____

SIGNIFICANT SCOUTER ACCOMPLISHMENTS: _____

F. IS NOMINEE EMPLOYED IN ANYWAY BY THE BOY SCOUT OR GIRL SCOUTS OF AMERICA? (CIRCLE) YES NO
IF YES, WHAT POSITION IS HELD? _____

III. LOCAL SCOUT COUNCIL CERTIFICATION

(STATEMENT BY LOCAL SCOUT COUNCIL SUGGESTING WHY THIS APPLICANT SHOULD BE CONSIDERED FOR RECOGNITION AS THE 2017 OUTSTANDING SCOUTER-OF-THE-YEAR. USE ADDITIONAL SHEETS IF NECESSARY.)

I CERTIFY THE ABOVE NOMINEE IS CURRENTLY AN ACTIVE PARTICIPANT IN ACTIVITIES OF BOY SCOUTING or GIRL SCOUTING, U.S.A.

COUNCIL NAME: _____ DATE: _____
COUNCIL ADDRESS: _____
TELEPHONE: (_____) _____
SIGNATURE OF COUNCIL REPRESENTATIVE: _____
TITLE: _____