





<u>2019</u> <u>DEPARTMENT OF PENNSYLVANIA</u> 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.

TITLE: __

F. APPLICATIONS MUST BE SUBMITTED TO DEPARTMENT HEADQUARTERS BEFORE:

MARCH 1, 2019

G. **RETURN TO:**

THE AMERICAN LEGION
DEPARTMENT OF PENNSYLVANIA
P.O. BOX 2324
HARRISBURG, PENNSYLVANIA 17105-2324

II.	<u>APPLICATION</u> (PLEASE PRINT/USE ADDITIONAL SHEETS IF NECESSARY)						
	A.	PERSONAL INFORMATION	<u>V:</u>				
		<i>NAME:</i>		TELEPH	HONE: (_)	
		<i>ADDRESS:</i>					
		<i>CITY:</i>		<i>STATE</i> :		ZIP:	
		OCCUPATION:					
		EMPLOYER:					
		WORK ADDRESS:					
		WORK TELEPHONE: ()				
	В.	RECOMMENDING AMERIC	'AN LEGION PO	OST/DISTRIC	T INFOR	<u>MATION</u>	
		POST NUMBER:	POST NAME:	·			
		<i>CITY:</i>		STATE:			
		LEGION DISTRICT NUMB	EER:SECT	ION (CIRCLE):	Eastern	Central	Western
		LOCAL AME	RICAN LEGIO	N POST CON	<i>IMANDE</i>	R	
		OR A	DJUTANT'S C	ERTIFICATIO	N:		
				(SIGNATURE	REQUIREI	D) DATE: _	
		<i>TITLE:</i>					
							Western
		<u>AMERICAN LEGION D</u>	<u>ISTRICT REPI</u>	<u>RESENTATIV</u>	<u>E CERTI</u>	<u>FICATION</u>	<u>V:</u>
				(SIGNATURE	REQUIRE	$D \setminus DATF$	

C. LI	IST COMMUNITY ACTIVITIES:
D. LI	IST COMMUNITY AWARDS/RECOGNITIONS:
E. <u>SC</u>	COUTING 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:
A. IF	S NOMINEE EMPLOYED IN ANYWAY BY THE BOY SCOUT OR GIRL SCOUTS OF MERICA? (CIRCLE) YES NO F YES, WHAT POSITION IS HELD?
(STATI BE CO	SCOUT COUNCIL CERTIFICATION TEMENT BY LOCAL SCOUT COUNCIL SUGGESTING WHY THIS APPLICANT SHOULD ONSIDERED FOR RECOGNITION AS THE 2019 OUTSTANDING ITER-OF-THE-YEAR. USE ADDITIONAL SHEETS IF NECESSARY.)
l CI	ERTIFY THE ABOVE NOMINEE IS CURRENTLY AN ACTIVE PARTICIPANT ACTIVITIES OF BOY SCOUTING or GIRL SCOUTING, U.S.A.
COUN	NCIL NAME: DATE: DATE: DEPHONE: () DATE:
	VATURE OF COUNCIL REPRESENTATIVE:

TITLE: _____