



**SCOUTING
AMERICA**



**2025
LEGIONNAIRE**



SCOUTER-OF-THE-YEAR APPLICATION

I. AWARD INFORMATION

- A. Recipient will be invited to the Department Convention and awarded a plaque.
- B. Recipient will receive mileage and one-day per diem allowance.
- C. There shall be one recipient selected from the Department
- D. Applicants must be active, registered Adult Scouter in a Scouting America or Girl Scout council.
- E. Applicant must be a member of an American Legion Post in the Department of Pennsylvania.
- F. **APPLICATIONS MUST BE SUBMITTED TO DEPARTMENT HEADQUARTERS BEFORE:**

MARCH 1, 2025

G. RETURN TO:

**THE AMERICAN LEGION
DEPARTMENT OF PENNSYLVANIA
SCOUTING COMMITTEE
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. AMERICAN LEGION MEMBERSHIP INFORMATION

POST NUMBER: _____ **POST NAME:** _____
CITY: _____ **STATE:** _____
2021 AMERICAN LEGION MEMBERSHIP CARD NUMBER: _____
NUMBER OF YEARS CONTINUOUS AMERICAN LEGION MEMBERSHIP: _____ **YEARS**
LEGION DISTRICT NUMBER: _____ **SECTION (CIRCLE):** Eastern Central Western
AMERICAN LEGION OFFICES HELD: _____

AMERICAN LEGION ACTIVITIES: _____

**LOCAL AMERICAN LEGION POST COMMANDER
OR ADJUTANT'S CERTIFICATION:**

_____ (SIGNATURE REQUIRED) DATE: _____

PRINTED NAME AND LEGION NO. _____

TITLE: _____

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 BY THE SCOUTING AMERICA 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 2025 AMERICAN LEGIONNAIRE SCOUTER-OF-THE-YEAR. USE ADDITIONAL SHEETS IF NECESSARY.)

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

COUNCIL NAME & NO.: _____ DATE: _____

COUNCIL FULL ADDRESS: _____

TELEPHONE: (____) _____

SIGNATURE OF COUNCIL REPRESENTATIVE: _____

PRINTED NAME & SCOUT ID NO. _____

TITLE: _____