

**SILVER BEAVER AWARD
NOMINATION**



TO THE SILVER BEAVER COMMITTEE:

I have read the requirements listed on the reverse of this application and I take pleasure in presenting for your consideration the nomination of the Scouter named below for the Silver Beaver Award.

Name _____ Age _____ DOB _____

(Give full name, correctly spelled, and title if any)

Address _____ City _____ State _____ Zip Code _____

Occupation (title, company): _____

District _____

1. Scouting service IN UNITS (list current position on top line):

<u>Position</u>	<u>Unit</u>	<u>Chartering Institution</u>	<u>Month & Year</u>		<u>Month & Year</u>
_____	_____	_____	_____	to	_____
_____	_____	_____	_____	to	_____
_____	_____	_____	_____	to	_____
_____	_____	_____	_____	to	_____
_____	_____	_____	_____	to	_____
_____	_____	_____	_____	to	_____

2. Scouting service IN DISTRICTS AND COUNCILS (list current position on top line):

<u>Position</u>	<u>District, Council</u>	<u>Year</u>		<u>Year</u>
_____	_____	_____	to	_____
_____	_____	_____	to	_____
_____	_____	_____	to	_____
_____	_____	_____	to	_____
_____	_____	_____	to	_____
_____	_____	_____	to	_____

3. Scouting Awards or Recognition and dates

- | | | |
|--|---|--|
| <input type="checkbox"/> Eagle Scout _____ | <input type="checkbox"/> Basic Training _____ | <input type="checkbox"/> Wood Badge _____ |
| <input type="checkbox"/> O.A. Vigil Member _____ | <input type="checkbox"/> Training Award _____ | <input type="checkbox"/> Adult Religious Award (s) _____ |
| <input type="checkbox"/> District Award of Merit _____ | <input type="checkbox"/> Unit Leaders Key _____ | <input type="checkbox"/> _____ |
| | | <input type="checkbox"/> _____ |

4. *Attach a one-page statement of volunteer service outside of Scouting. Include service rendered, leadership positions held, recognitions, honors, and length of service. Pay particular attention to service to youths and the full and proper name of the organization.*

Please list in this order:

- A. Church affiliation and service
- B. Civic/community/fraternal (other than Scouting)
- C. Professional, trade, or business related
- D. Other outstanding or unusual service

Nomination prepared by: _____

Address _____ City _____ State _____ Zip _____

Phone B) () _____ H) () _____ E-mail _____

Position in Scouting (if any) _____

Date of nomination ____ / ____ / ____

(Month /date/year)

-
- *Letters of reference are desired, however decisions will be made based on the facts provided in this nomination.*
 - *This nomination must remain confidential to the nominees. To avoid any possible disappointment please do not share in any way your actions on their behalf.*
 - *Please save a copy of your nomination to use in future years should your nominee not be chosen. Nominations must be submitted annually and are not carried over by the committee.*
 - *We are limited to one Silver Beaver Award for each 60 units (Packs, Troops, Crews, and Posts) registered in our Council at year-end.*

Requirements

- *Candidates for the award must be registered volunteer Scout leaders within our Council or high-profile community leaders*
- *They must have rendered noteworthy service of exceptional character to youths.*
- *A minimum of ten years of accumulated service as an adult in Scouting will be considered.*
- *Service to youths and community outside of Scouting is desirable.*

Nominations and Inquiries to: **Silver Beaver Award Committee**
Boy Scouts of America
4568 West Pine Boulevard
St. Louis, MO 63108-2193