2019 NOMINATION FORM

GRAND TETON COUNCIL

NOMINATIONS DUE **JANUARY 31, 2019**

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 ELIGIBILITY REQUIREMENTS At the 2019 Council Recognition Night in the spring.

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).
- Have rendered distinguished service as a Scouting volunteer. 2.

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:		Occupatio	n:	_ Age:	Phone(s):	
Address:			City:		State:	Zip:
Nominee's e-mail address:						
Currently registered in:		Distric	ct. Scouting positions(s):			
ADULT SCOUTING LEADE	RSHIP F	OSITIONS HEL	D:			
Position	<u>Year</u>	<u>Position</u>	<u>Year</u>	<u>Position</u>		<u>Year</u>
TOTAL Number of Years a						
SCOUTING LEADER TRAIN	IING CO	URSES COMPL	ETED:			
Position	<u>Year</u>	<u>Position</u>	<u>Year</u>	Position		Year

YOU MUST COMPLETE THE BACK SIDE OF THIS NOMINATION FORM

Recognition	Year Recognition AND HON		cognition	<u>Year</u>
SERVICE RENDERED OUTS (Adult service to church, community, Organization	education, business, civic, pro		r service other than Sco <u>Organizatio</u>	outing.) on
RECOGNITION AND HONOR	S/AWARDS RECEIVED	(Outside of Scouting):		
Provide additional information	າ that illustrates this nor	minee's dedication and s	service to Scouting	g and youth:
Submitted by (please print legibly)		Phone	Date	
Address (please print legibly)		City	State	

Submit or mail to:

Grand Teton Council Idaho Falls Service Center 3910 So. Yellowstone Highway Idaho Falls, ID 83402