

OA Election Form

Troop # _____	Date of Election _____
Is Troop or Team eligible to hold an election <input type="checkbox"/> Yes <input type="checkbox"/> No	
Location of Election _____	
District _____	



Order of the Arrow
Grand Teton Council #107
Shunkah Mahneetu #407
Unit Election Form

Scoutmaster/Varsity Coach must read and certify the unit election and membership requirements prior to unit elections (see cover page)							
First Name*	Last Name*	Rank*	Street/City/State/Zip*		Phone (Parents)*	Birth Date*	Elected
			Email (Parents)*				
							<input type="checkbox"/>
							<input type="checkbox"/>
							<input type="checkbox"/>
							<input type="checkbox"/>
							<input type="checkbox"/>
							<input type="checkbox"/>

*These are required. Please print legibly.

Number of Members eligible to be elected:		As unit leader, I certify, by my signature, that the above youth members are eligible, according to the youth member qualifications, and approve them as nominees for election and that we have read and understand the requirements on the cover page of this form
Number of votes required to be elected:		
Number of ballots turned in:		
Number elected:		
OA Election Team Signatures		Unit Leader Signature:
		Unit Leader Printed Name:
		Unit Leader Address:
		Unit Leader Email: