

Butte District Award Nomination Form

Awards: Please check only one per form.

District Award of Merit Spirit of Scouting Outstanding Committee Member
 Cubmaster of the Year Den Leader of the Year Scoutmaster of the Year
 Venture Crew Leader Varsity Team Leader WEBELOS Leader of the Year

Name: _____ Address: _____

City: _____ State: _____ Zip: _____ Phone: _____

Current Registered Scouting Position(s):

1. _____
2. _____
3. _____
4. _____

Unit Type (Check One): Pack Troop Team Crew Unit #: _____

Total Number of years registered as an Adult Leader: _____

Service Through Scouting

Adult Scouting Leadership Position Held

Position: _____	Date: _____	Position: _____	Date: _____
Position: _____	Date: _____	Position: _____	Date: _____
Position: _____	Date: _____	Position: _____	Date: _____
Position: _____	Date: _____	Position: _____	Date: _____

Scouting Leader Training Courses Completed

Course: _____	Date: _____	Course: _____	Date: _____
Course: _____	Date: _____	Course: _____	Date: _____
Course: _____	Date: _____	Course: _____	Date: _____
Course: _____	Date: _____	Course: _____	Date: _____

Previous Recognitions, Honors or Awards Received

Recognition: _____	Date: _____	Recognition: _____	Date: _____
Recognition: _____	Date: _____	Recognition: _____	Date: _____
Recognition: _____	Date: _____	Recognition: _____	Date: _____
Recognition: _____	Date: _____	Recognition: _____	Date: _____
Recognition: _____	Date: _____	Recognition: _____	Date: _____

