

SILVER BEAVER NOMINATION WORKSHEET

BOY SCOUTS OF AMERICA
GERALD R. FORD COUNCIL
3213 WALKER AVE. NW
GRAND RAPIDS, MI 49544-9775

Please return to the DeVos Family Center for Scouting,
attn: Silver Beaver Committee, no later than February 27.

Name _____

Address _____

Occupation _____

The nominee is registered in Scouting as _____ and holds a membership certificate expiring
_____ 20 _____. (If Scouter is currently unit-connected, give unit number _____.)

RECORD UPON WHICH THIS NOMINATION IS BASED

A. RECORD OF ADULT SERVICE IN THE BOY SCOUTS OF AMERICA:

	From:	To:	Position:	Unit/District/Council
1.	_____	_____	_____	_____
2.	_____	_____	_____	_____
3.	_____	_____	_____	_____
4.	_____	_____	_____	_____
5.	_____	_____	_____	_____
6.	_____	_____	_____	_____

B. SPECIAL SCOUTING RECOGNITIONS RECEIVED: (Indicate the year received)

	AWARD/RECOGNITION	DATE
1.	_____	_____
2.	_____	_____
3.	_____	_____
4.	_____	_____
5.	_____	_____
6.	_____	_____

ADDITIONAL SHEETS MAY BE ADDED IF NECESSARY

C. NOMINEES STANDING IN THE COMMUNITY/ACTIVITIES OUTSIDE OF SCOUTING:

1. BUSINESS/PROFESSIONAL: _____

2. CIVIC: _____

3. RELIGIOUS: _____

4. EDUCATIONAL: _____

5. FRATERNAL: _____

6. VETERAN: _____

7. OTHER: _____

D. NOTEWORTHY SERVICE OF EXCEPTIONAL CHARACTER TO YOUTH WITHIN COUNCIL JURISDICTION.

ADDITIONAL SHEETS MAY BE ADDED IF NECESSARY

* YOUR NOMINATION SHOULD BE CONFIDENTIAL - PLEASE DO NOT ADVISE THE CANDIDATE OF YOUR NOMINATION*

NOMINATED BY: _____ DATE: _____

SCOUTING POSITION: _____

TELEPHONE NUMBER: HOME: _____ BUSINESS: _____