

Catholic Committee on Scouting

2017 OFFICIAL ADULT SCOUTER AWARD NOMINATION FORM cathcomm@lusfiber.net

PLEASE PRINT NEATLY.

To assist the Catholic Committee on Scouting in making their selections for this year's adult awards, please provide thorough answers and provide supporting, written information that will affirm your nominee. The information should be complete and current, and reflect service in Catholic Scout/youth development. Please note that the Catholic Committee relies on provided information and may compare Council resources for verification. **Attach additional pages if needed. Mail completed form to (no scanned or emailed forms can be accepted): CATHOLIC COMMITTEE AWARDS, 400 Aundria Drive, Lafayette, LA 70503**

THIS NOMINATION FORM MUST BE POSTMARKED BY AUGUST 15, 2017

Section 1. Nominee Information [All information is required]

CCS Adult Award Nominee: _____	Phone: H-- _____	W-- _____	
Address: _____	Email _____		
Church Parish: _____	Pastor: _____		
Pastor's Approval (signature): _____	Date: _____		
Parish phone: _____	Address: _____		
Is nominee currently registered in BSA?: <input type="radio"/> Yes <input type="radio"/> No Unit Chartered by: _____ Unit No.: _____			
Present Scouter Position held: _____ Total years registered as Adult Scouter: _____			

Section 2. List known positions nominee has held as an Adult Scouter and years in each position.

SCOUTING POSITION	UNIT or District/Council	Years of service (<i>Example: 2002-2005</i>)

Section 3. List known positions nominee has held in his/her Church ministry and/or civic involvement.

CHURCH VOLUNTEER POSITION	Church REQUIRED for all except Scouting Scroll of Honor	Years of service (<i>Example: 2002-2005</i>)
CIVIC VOLUNTEER POSITION	Civic Organization (School, Sports, Professional, etc) REQUIRED for McGoffin, St. George	Years of service (<i>Example: 2002-2005</i>)

Section 4. List known Adult Scout training courses or BSA-sponsored Scout leadership activities the nominee has completed:

SCOUTER COURSE	YEAR	SCOUTER COURSE	YEAR

Section 5. List known Catholic Committee-sponsored activities nominee has attended/staffed (and dates).

ACTIVITY	DATE	ACTIVITY	DATE

Section 6. List known Adult Scouter Awards and recognitions previously received.

TITLE OF AWARD	YEAR	TITLE OF AWARD	YEAR

Section 7. In your own words, why do you think this nominee is qualified for this award? How has he/she fostered Scouting under Catholic Auspices? **(Required -- Must be a separate page -- Attach to this nomination form)**

Your Name: _____ Phone: _____
 Address: _____ email _____
 Your position in Scouting: Unit # _____ Registered? Yes No If not registered: Parent of Scout? Yes No