



SILVER BEAVER AWARD NOMINATION

The Silver Beaver Award is presented by the National Council for distinguished service to youth.

Return by **December 1** to:

Texas Southwest Council, BSA
PO Box 1584
San Angelo, Texas 76902

1. Mr./Mrs./Miss: _____ Birth date: _____

2. Address _____ Phone: _____
(number) (street) (city) (state)

3. Occupation (title, company): _____

4. Total years registered as: Scout _____ Scouter _____

5. Scouting service **IN UNITS** (list current position on top line):

<u>Position</u>	<u>Unit</u>	<u>Chartered Partner</u>	<u>Dates</u>
_____	_____	_____	_____ to _____
_____	_____	_____	_____ to _____
_____	_____	_____	_____ to _____
_____	_____	_____	_____ to _____
_____	_____	_____	_____ to _____

6. Scouting service in District, Council, Regional, or National (list current position on top line.)

<u>Position</u>	<u>District, Council, etc.</u>	<u>Years</u>
_____	_____	From _____ to _____
_____	_____	From _____ to _____
_____	_____	From _____ to _____
_____	_____	From _____ to _____
_____	_____	From _____ to _____

7. Scouting Awards or Recognition and dates:

- | | | |
|-----------------------|---------------------------|--------------------------|
| () Scout Rank _____ | () Training Award _____ | () Wood Badge _____ |
| () Eagle _____ | () Training Key _____ | * Course _____ |
| () O.A. Member _____ | () Adult Religious _____ | * Staff _____ |
| *Ordeal _____ | Award(s): _____ | () Quality Unit _____ |
| *Brotherhood _____ | _____ | () Award of Merit _____ |
| * Vigil _____ | () Youth Religious _____ | () James E West _____ |
| () Other _____ | _____ | |
| _____ | _____ | |
| _____ | _____ | |

8. Activities outside Scouting: Resume of service rendered, position(s) held, honors and recognitions and length of service under following headings (give particular attention to service to youth and full name of each organization.) Attach additional sheets as necessary to fully answer the following. Please be brief.

A. Family life: _____

Church affiliation:

B. Civic/Community (other than Scouting):

C. Fraternal: _____

D. Professional/Business:

E. Military Record:

F. Other outstanding or exemplary service:

9. Provide a brief statement that summarizes how this individual has provided noteworthy service to youth:

10. Participates in council Friends of Scouting? () Yes () No

11. How does this individual demonstrate positive support of the council and its activities?

PREPARED BY: _____

Address: _____

City: _____ Zip: _____

Daytime Phone: (_____) _____

Position in Scouting: _____

Revised 09/14

FOR SELECTION COMMITTEE USE ONLY	
Key 3 Recommendation	() Highly recommend () Recommend () No recommendation () Do not recommend
Chairman	Commissioner Executive