



SAC-N-FOX
VIGIL HONOR NOMINATION
DEADLINE: WEDNESDAY, MARCH 31, 2010

Nominee's Information

Last Name: _____ First Name: _____ Middle initial: _____

Mailing Address: _____ City: _____

State: _____ Zip Code: _____ E-mail Address: _____

Home Phone: (____) _____ Cell Phone (____) _____

OA Chapter: _____ Unit Type: _____ Unit Number: _____

Camping Record

Number of years attending Cub Scout Resident Camp as: Youth ____ Adult ____

Number of years attending Boy Scout Summer Camp as: Youth ____ Adult ____

Please list the years of attending for the following:

OATC: _____ OAWV: _____ Eagle Claw: _____

Philmont: _____ Northern Tier: _____ Sea Base: _____

National Jamboree: _____ World Jamboree: _____ OKPIK: _____

Please list Troop camping experience: _____

Scouting Record

Number of years active in: Cub Scouting- _____ Boy Scouting- _____

Highest Rank achieved in: Cub Scouting- _____ Boy Scouting- _____

List any leadership positions in the Pack with the number of years in parenthesis:

List any leadership positions in the Troop with the number of years in parenthesis:

List any leadership positions in the District or Council with the number of years in parenthesis:

List any other awards in Scouting: _____

CONFIDENTIAL

CONFIDENTIAL

Lodge Record

Induction date: ____ / ____ / ____ Brotherhood date: ____ / ____ / ____

Chapter positions held as a youth officer or adult adviser: _____

Lodge positions held as a youth officer or adult adviser: _____

Lodge committees served on: _____

List the number of times the nominee has attended the following events:

Fellowships: ____ Winter Banquet: ____ Section Conclave: ____

NOAC: ____ One Day of Service: ____

Training

List the year(s) the nominee completed the following training:

NLS: ____ NLATS: ____ LLDC: ____

JLT: ____ Eagle Claw: ____ LNT: ____

BALOO: ____ OSI: ____ Position Specific: ____

Basic Leader Training: ____ Wood Badge: ____

Community Service

Please describe the nominee's involvement and service they have provided in their community:

Nominator Information

Last Name: _____ First Name: _____ Middle Initial: ____

Mailing address: _____ City: _____

Zip Code: _____ Email Address: _____

Home Phone: (____) _____ Cell Phone: (____) _____

Suggested Vigil name for candidate: _____

Attach an additional paper describing the specific reason for nomination the candidate.

Please submit this form to:
Gary Stattler
Vigil Advisor
P.O. Box 86
Conrad IA 50621 or
gstat@heartofiowa.net

OR

Vigil Nomination
Winnebago Council
Boy Scouts of America
2929 Airport Blvd.
Waterloo IA 50703

NOTE: This recommendation is confidential. To avoid any possible disappointment, please do not advise the nominee in any way of your action on their behalf. A new nomination must be submitted each year.

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