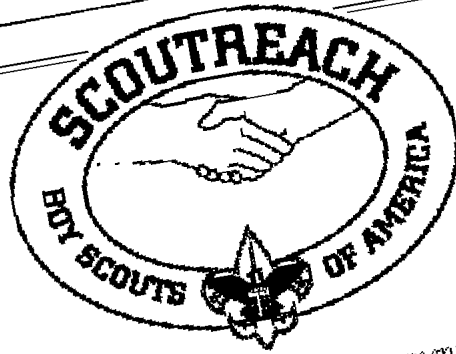


# The Spirit of Scouting Award



The Boy Scouts of America presents  
**The Spirit of Scouting Award**  
to

\_\_\_\_\_ in appreciation for service to urban youth

DATE

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SCOUTREACH • BOY SCOUTS OF AMERICA

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BOY SCOUTS



OF AMERICA

# The Spirit of Scouting Award

## Purpose

The Spirit of Scouting Award is designed for presentation to a noteworthy individual who has performed exceptional and unusual service to young people in hard-to-reach communities\* over a long period of time.

## Council Procedures

1. Recipients are approved *locally* through nomination by the local council. (Councils should use the nomination form in this booklet.) Copies may be obtained from the Scoutreach Division, Boy Scouts of America, S260, 1325 West Walnut Hill Lane, P.O. Box 152079, Irving, TX 75015-2079.

2. The Spirit of Scouting Award is a special certificate and can be ordered through the Scoutreach Division.

The Scoutreach Division will provide a Spirit of Scouting Award certificate, No. 11-031, for presentation by the local council.

3. The award is presented to individuals at the unit level and to people of all races and income levels.

4. The number of awards presented annually is determined by the Scout executive.

5. Recipients should be recognized at a highly visible event, with an appropriate ceremony during which the award is presented. Council and district appreciation dinners, annual business meetings, testimonial dinners, or a major function with which the recipient is associated provide excellent settings for this presentation.

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\* The Scoutreach emphasis brings the Scouting program into hard-to-reach communities. These communities need Scoutreach because of varied concerns such as skin color, cultural differences, economics, education, ethnicity, geography, and language.

# The Spirit of Scouting Award

## Nomination Form

Submitted by: \_\_\_\_\_

Position: \_\_\_\_\_

Council name and number: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip code: \_\_\_\_\_

We hereby nominate for consideration of the Spirit of Scouting Award:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip code: \_\_\_\_\_

Home telephone number: \_\_\_\_\_ Business telephone number: \_\_\_\_\_

Occupation: \_\_\_\_\_

Current position in Scouting: \_\_\_\_\_

Unit number: \_\_\_\_\_ Chartered organization: \_\_\_\_\_

Please return the completed nomination form to your local council service center.





# The Spirit of Scouting Award

