GSUSA Adult Recognition Award Application

Nominee:		
(Please Print)	Scout Unit #:	Parish:
Name:		
Address:		
City:		State: Zip Code:
Email:		
Home Phone:	()	Work Phone: ()
Nominated By:		
Name:		
Address:		
City:		State: Zip Code:
Email:		
Home Phone:	()	Work Phone: ()
development of	Catholic youths through	he outstanding service the nominee has given to the spiritual the Scouting apostolate. Include pertinent dates. Use additional sheets hould be placed on the first point below.
RECORD OF N	NOMINEE:	
1) Service to or p	positions held in the spiri	tual development of Catholic youths in the Scouting apostolate.
2) Service to or p	oositions held in the Girl	Scouts USA.
3) Service to or p	positions held in the paris	sh, (arch) diocese/eparchy or both.
4) Service to or p	positions held in other or	ganizations (such as business, civic, religious, educational and fraternal)
Return nomination to:		Catholic Committee on Scouting Attn: Harvey Carter 9100 Crockett Road

Or send it via email: <u>Catholic Committee on Scouting</u>

Brentwood, TN 37027