

**TRAILBLAZER DISTRICT ADULT LEADER
RECOGNITION AWARD APPLICATION**

To be completed by any Registered Scouter:

Nominee's name: _____ **Unit:** _____

Current Scouting Position: _____

Years in current position: _____ **Total years in adult Scouting:** _____

Please indicate which award. Use a separate sheet for each nominee. Please provide as much information as possible, add additional comments on reverse side. See award guidelines on attached sheet.

_____ **Scout Family of the Year**

_____ **Cubmaster of the Year**

_____ **Scoutmaster of the Year**

_____ **Varsity Coach of the Year**

_____ **Committee Chairman of the Year**

_____ **Venture Advisor of the Year**

_____ **Charter Organization Representative
of the Year**

_____ **Trailblazer Award**

1. In what ways has this nominee been active in Scouting (events/service/staff/etc)?

2. What Training Awards and Leadership positions has nominee attained?

3. How has this nominee furthered the Aims of Scouting (Citizenship development, Character building and Personal fitness)?

4. Why do you feel this nominee should receive this award?

Scouter making recommendation: _____ Unit _____

Position: _____ Date: _____