



**CONFIDENTIAL NOMINATION FORM  
FOR SILVER BEAVER AWARD**

**RECOMMENDATION TO COMMITTEE  
FOR SILVER BEAVER SELECTION**



The Silver Beaver Award is made for distinguished and outstanding service to youth within the territory under the jurisdiction of the Gulf Stream Council, Boy Scouts of America. The number awarded is derived from a formula established by the National Council, Boy Scouts of America and may vary from year to year. The award is made by the Boy Scouts of America based upon nominations from the local councils.

**The award is based upon:**

- Record of service in the Boy Scouts of America
- The nominee’s standing in the community
- Record of noteworthy service of exceptional character to youth within the territory under the jurisdiction of this council

PLEASE SEND APPLICATION TO:  
GULF STREAM COUNCIL, BSA

Attn: Chairman Silver Beaver Selection Committee  
8335 NORTH MILITARY TRAIL

PALM BEACH GARDENS, FL 33410

561-694-8585 / FAX 561-694-9050

BSAGSC@SCOUTING.ORG - WWW.GULFSTREAMCOUNCIL.ORG

1. Give the full name and title (if any) of the nominee just as it is to appear on the Silver Beaver Certificate in the event the award is granted. Please **do not** use abbreviations, initials only or nicknames.
2. The “service to youth” requirement is not limited to service to Scouting.
3. Long-established policy limits the award of the Silver Beaver to adults over the age of 21 who are currently registered as volunteer Scouters.
4. NOMINATIONS NOT FAVORABLY ACTED UPON ARE NOT AUTOMATICALLY CARRIED OVER FOR CONSIDERATION BY THE FOLLOWING YEAR’S SILVER BEAVER SELECTION COMMITTEE . INDIVIDUALS MUST BE RENOMINATED TO RECEIVE CONSIDERATION.
5. Use additional sheets of paper if more space is needed to list your candidate’s qualifications.

**I WISH TO RECOMMEND FOR THE SILVER BEAVER AWARD:**

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

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

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

District: \_\_\_\_\_ Phone (B): \_\_\_\_\_ Phone (H): \_\_\_\_\_

Nominee’s Scouting Position: \_\_\_\_\_

Date of birth: \_\_\_\_\_ Age: \_\_\_\_\_ Single / Married (circle one)

Name of Spouse: \_\_\_\_\_

Nominated by: \_\_\_\_\_ (Printed name) \_\_\_\_\_ (Signature)

Date submitted: \_\_\_\_\_

**Deadline: Second Friday in November**



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**2. LIST HERE ALL POSITIONS HELD AS A DISTRICT SCOUTER:**

POSITION DISTRICT APPROXIMATE DATES

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**Please comment fully, giving specific instances of outstanding leadership:**

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**3. LIST HERE ALL POSITIONS HELD AS A COUNCIL SCOUTER:**

POSITION COUNCIL APPROXIMATE DATES

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**Please comment fully, giving specific instances of outstanding leadership:**

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4. **OTHER SCOUTING ACTIVITY:** Indicate here any other information that you feel should be brought to the attention of the selection committee, such as leadership given in Scout Shows, Ticket Sales, Friends of Scouting, Membership, Camporees, other special District and Council Events, Training Courses, Jamborees, etc.

<u>POSITION</u>	<u>EVENT</u>	<u>DATES</u>

5. **LIST HERE PARTICIPATION IN OTHER ACTIVITIES FOR THE BENEFIT OF THE COMMUNITY:** (State type: church, fraternal, service club, school, etc. and GIVE SPECIFIC DATES AND POSITIONS HELD) (Comment specifically on any “service to youth”):

<u>ACTIVITY TYPE</u>	<u>POSITION</u>	<u>DATES</u>

6. **Business, Professional, Civic and Fraternal Affiliations:**

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**Submitted by:**

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

Position in Scouting: \_\_\_\_\_ District: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone (B): \_\_\_\_\_ Phone (H): \_\_\_\_\_