

UNIT ADULT RECOMMENDATION 2019 (Age: 21 and over)

Each year, upon holding a troop or team election for youth candidates, which results in at least one youth candidate being elected, the unit committee may recommend one adult to the lodge adult selection committee for every 3 youth elected rounding up to the next whole number. For example if 5 Scouts are elected, then rounding up the Unit could nominate 2 adults. The following conditions are the basis for candidate selection and MUST be fulfilled to be considered. Make a brief statement regarding the individual for each item. If a Scoutmaster, Crew Advisor, or Skipper (hence called unit leader) has been in the position for over 1 year, he or she can be recommended in addition to the quota above, as long as he or she meets the camping requirements.

Please Read before completing form. Selection and induction into the Order of the Arrow of an adult Scouter should take place only when the adult's job in Scouting will make Order of the Arrow membership more meaningful in the lives of the youth membership. It must not be for the purpose of adult recognition.

The adult being recommended should be contacted and the unit committee should explain what is expected in return for this recommendation, namely providing transportation for the youth of the unit to OA functions, attendance at OA events and support of camping within the unit. Don't make it a suprise to the nominee.

The approval process is not instantaneous. The application must be reviewed for completeness and then after registration is verified it is presented to the approval committee. The committee meets every 3 to 4 weeks so after you submit the form it may be a few weeks before it can be approved. If the applicant is found to be ineligible based on the information submitted the form will be returned for more information. The approval will be sent to the applicant by email along with the registration form for the weekends. Email inquiries can be submitted to the Lodge Adviser at lodgeadviser@hakinskayaki.org.

Troop/Crew/Ship _____ Unit Number: _____ District: _____ This unit elected: _____ Scouts on _____

This is a Special Nomination using the Unit Leader Exception: _____ If yes, Unit Leader took office on: _____

Nominee's Position: _____

Nominee's Name: _____ Preferred name: _____
Last, First, Middle (PRINT FULL NAME)

Address: _____ City: _____ State: _____ ZIP: _____

Birthdate: _____ Phone[B]: _____ [H]: _____ [C]: _____

Woodbadge: _____ Scouter Key: _____ How long registered as Adult: _____ Scouting Positions Held: _____

Email Address: _____ BSA Personal ID Number: _____

Scout as a Youth: _____ Rank: _____ Community Activities: _____

Church Activities: _____ Vocation: _____

Special Interests: _____

1. Selection of the adult is based upon ability to perform the necessary functions and not for recognition of service, including current or prior achievement and position. The individual's abilities include:

2. This adult will be an asset to the Order due to demonstrated skills and abilities, which fulfill the purpose of the Order, in the following manner:

3. **The camping requirements that apply for youth candidates apply to adult candidates and must have been fulfilled within the most recent two years prior to recommendation for membership.** The requirement, which is a minimum of fifteen days and nights of camping, which must include no more than on long-term camp consisting of five consecutive nights of overnight camping, approved and under the auspices and standards of the Boy Scouts of America, was fulfilled as follows: **Be specific! list all dates and location of short-term and long-term camping experiences within the past 2 years on reverse side or attach printout or list. Form will be returned if this information is not listed on back of this form or attached as requested.**

UNIT RECOMMENDATION

The adult leader who fulfills the above requirements (complete above information) is recommended for membership consideration in the Order of the Arrow.

Date: : _____ Unit Leader: _____ Committee Chairman: _____
Print Names then initial, so they can be read and contacted if additional information is required

Address (Street, City and Zip) of person submitting form _____

Phone number of persons submitting form: _____

DISTRICT/COUNCIL RECOMMENDATION

The adult Leader who fulfills the above requirements (complete above information) is recommended for membership on in the Order of the Arrow

Date: : _____ By: _____ Position: _____
Print Names then initial, so they can be read and contacted if additional information is required

Phone number of person submitting form: _____

LODGE ADULT SELECTION COMMITTEE

Authorizing Signatures & Date

SELECTED: [] NOT SELECTED: []

Comments:

Council Camping Chairman*: _____

Lodge Adviser: _____

Lodge Staff Adviser: _____

Scout Executive: _____

*Signature of the Council Camping Chairman or chairman of the council committee on which the lodge adviser serves.

Make a Copy of this completed form for your unit records!

LIST OF CAMPING EXPERIENCE WITHIN PAST 2 YEARS

Remember you can count only 1 long-term camp experience (maximum of 5 nights) toward the required total of 15 nights. The remaining 10 nights must be from short term scout campouts (or ship nights).

<u>DATES</u>	<u>LOCATION</u>	<u>NUMBER OF NIGHTS</u>

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