



**SCOUTS CANADA**  
**APPLICATION FOR**  
**AWARD FOR GALLANTRY**  
 Eligible – Registered members of Scouts Canada



This application is to be initiated within six months of the act, and must give a full and explicit description. Attach signed statements of witnesses. Three statements are required but less are acceptable if this is not possible.

Candidate's MMS #	Surname:	Given names (underline name most commonly used)				
Full postal address:		If application for posthumous decoration name next of kin				
Age:	Rank in section (patrol leader etc.)		Group name & number		Number years in movement	
	Section:					
Date of act:		Weight:	Height:	District or Region:		
Name(s) of person or persons rescued:			Full postal address(es):			
Age of rescued:	Height:	Weight:	Gender:	Conscious or unconscious?	Rescuer alone?	If rescue was a joint action by more than one member of Scouting, complete a separate application for each.

Continue on next page – attach additional sheets if required together with other supporting materials.

Description of act (continued)

A scetch, plan or map involving the action is useful supporting documentation. Use space provided on last page.

### ADDITIONAL INFORMATION

In the case of a rescue from water, fire or electrical current, the following additional information should be supplied with the assistance of the rescuer, the rescued and others able to provide it.

#### WATER RESCUE

Name of body of water:	Depth of water:	Condition of shore:
Distance of rescue from land:	Did rescuer use a boat?	Could rescuer swim?
Had rescuer previous experience or training in life saving?	Ice on water?	Still or running water?
Condition of bottom (i.e. muddy; sand or gravel; weedy; snags; rocky):		Not known:

#### FIRE RESCUE

How close to flames did rescuer go?	Did rescuer pass through or close to smoke or fumes?	Was there danger of an explosion?	Was there danger from falling debris?
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#### ELECTRICAL RESCUE

Voltage:	Was there danger from moving or dangling cables or wires?	Was there additional danger from presence of water or moisture?	Did rescuer climb a pole or pylon to effect rescue?
Did rescuer perform CPR?		If CPR was performed, was it successful in restoring breathing?	
To what extent was the rescuer's life in danger?			
If rescuer was assisted, state by how many persons and give information about stature, training in life saving etc. which may guide the Honours & Awards Committees in their decisions.			
Add any additional information, which might show that local conditions either increased or diminished the danger.			

Remember, in the absence of other witnesses a signed statement of the person rescued may be submitted.

**SKETCH PLAN OR MAP**

(If space provided is insufficient, use a larger sheet and attach)

Name of initiator (print or type):		Initiator's postal address:		Position in Scouting:	Date:
Council Honours & Awards Committee:	Signature of Committee Chair:		Convened by (Council):		Date:
Recommendation: <b>Cross</b> Bronze <input type="checkbox"/> Silver <input type="checkbox"/> Gold <input type="checkbox"/> <b>Bar</b> Bronze <input type="checkbox"/> Silver <input type="checkbox"/> Gold <input type="checkbox"/>			Signature of Council Commissioner:		Date:
National Honours & Awards Committee Recommends:			Signature of Chair – National H & A Committee:		Date: