

*Medal of the Maple*  
**Nomination Form**

**Submitted on behalf of:**

Name: \_\_\_\_\_ Council: \_\_\_\_\_  
 Address: \_\_\_\_\_ Group/Area: \_\_\_\_\_  
 City: \_\_\_\_\_ Postal Code: \_\_\_\_\_  
 Section Currently Registered In: \_\_\_\_\_ Total Years in Scouting: \_\_\_\_\_

**Submitted by:**

Name: \_\_\_\_\_ Council/Group: \_\_\_\_\_  
 Address: \_\_\_\_\_ City: \_\_\_\_\_  
 Postal Code: \_\_\_\_\_ E-mail: \_\_\_\_\_  
 Phone Number: \_\_\_\_\_

**Scouting History:**

Please list the years registered in each section, as well as the position held, and group affiliated with.

Section	Years Participated	Position Held (Kim, Keo, President, etc.)	Group Affiliation

**Please describe other volunteer experience, non-Scouting related, that the applicant has provided to their local community:**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_





