



# Scout of the Month

*Attention all Cub Scout, Boy Scout and  
Venturer Leaders.*

In celebrating the 100<sup>th</sup> Anniversary of Scouting, the Buckeye Council wants to recognize the individuals that make this organization great and will move us forward to our next centennial.

Each month our council will recognize an individual Cub Scout, Boy Scout or Venturer from each of our four districts. Honorees are recognized by their leaders and peers for living by the Scout Oath, Promise, Law and service to Scouting and the community.

Scout of the Month recipients will receive a certificate, be recognized in their local newspaper and on the Buckeye Council website. Additionally, each Scout of the Month winner will automatically be entered into the Scout of the Year selection.

Please take a moment to complete the nomination form and submit a young individual to be recognized for their leadership and contribution. Additional nominations available on our website at [www.buckeyecouncil.org](http://www.buckeyecouncil.org)



As part of the 100th Anniversary of Scouting, the Buckeye Council will honor a youth (Cub Scout, Boy Scout or Venturer) from each district as Scout of the month. Honorees can be nominated for living by the Scout Oath, Promise and Law and for their leadership and service to Scouting and the Community. Please complete the information below, and submit to:

Buckeye Council  
c/o Scout of the Month Nomination  
2301 13th Street NW  
Canton, OH 44708

Month of Nomination:

Deadline for Entry: The 15th of Nomination Month

Scout: \_\_\_\_\_

Pack / Troop / Crew / Post #: \_\_\_\_\_

(circle one)

District:(Circle One) Greater Stark

Killbuck

Netawotwes

Sandy Beaver

Phone No. \_\_\_\_\_

Rank: \_\_\_\_\_

Address: \_\_\_\_\_

Email Address: \_\_\_\_\_

In your own words, describe why this Scout should be recognized: (Use separate sheet if you need more space)

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\_\_\_\_\_

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

Phone #: \_\_\_\_\_

Address: \_\_\_\_\_

Email Address: \_\_\_\_\_

How do you know this Scout: \_\_\_\_\_

Signature: \_\_\_\_\_

By signing this nomination you authorize the Buckeye Council to use your submission in part or in whole, as part of the press release recognizing the Scout nominated.

Permission must be received from the parent or guardian of the scout for possible interview by the media, pictures released to the media, and mention of the scouts name.

Parent/Guardian: \_\_\_\_\_ Signature: \_\_\_\_\_

**(FOR OFFICE USE ONLY)**

Date Nomination Received: \_\_\_\_\_

Approved: Yes / No (circle one)

Photo In: Yes / No (circle one)