

Harford District Lighthouse Award Nomination

Note: This nomination is to be submitted by the unit committee and will be held in strict confidence. Please do not inform the nominee.

Award for Unit # _____ for year 2023

The Lighthouse Award is presented to a unit-level Scouters for outstanding service to registered youth through unit activities over a sustained period of time. Each chartered unit in the District may receive one award per year for candidates who meet the following qualifications:

- 1. The candidate must have been a registered and currently trained leader for their primary registered leadership position in the unit for at least 24 months prior to the award nomination date. The candidate must not have been recognized with the Lighthouse Award in the previous three years.**
- 2. The volunteer service should have had a significant impact on the ability to provide the Scouting program to youth within the unit.**
- 3. The volunteer service should have been rendered over a sustained period of time, not just for a single event or activity.**
- 4. The volunteer service should be specific to the unit**
- 5. While each unit may receive one award per year, there is no obligation to submit a nomination if there are no qualified and deserving candidates.**

Nominations will be prepared by the unit committee or by individual members of the committee or the unit and must be approved by the Unit Committee

This award will be presented at the annual District Recognition Event. Please make arrangements for the recipient to attend the event.

Your "Statement of Service" will form the heart of the presentation. Please be detailed and specific.

Lighthouse Award Nomination

Pack # _____ Troop # _____ Crew # _____ Ship # _____

Name of Nominee: _____

Address: _____

Phone: _____

Registered Position(s) with this unit: _____

(Must be a *registered* and *currently* trained for their leadership position)

Length of Service: From _____ To _____

Detailed Statement of Service (25-75 words): Statement may be attached _____

State why this nominee should be considered as the outstanding scouter within your unit: Statement may be attached.

Period of Service (at least 2 years): _____

Person(s) submitting this nomination _____

SIGNATURE _____

PHONE # _____ EMAIL _____

*Nomination must be approved by the Unit Committee. Has the approval been secured from the Unit Committee Chair ___YES___NO

COMMITTEE CHAIR SIGNATURE _____