Name: ____________________________________________

Address: ____________________________________________

(City) __________________________ (State) ______ (Zip)

Age: ______
Telephone number: __________________________

E-mail: ____________________________________________

Is your Boy Scouts of America Unit chartered to an American Legion post, American Legion Auxiliary unit or Sons of The American Legion squadron? ______
If YES, please complete the following:

(Post/Unit/Squadron Number)

(School)

(City) __________________________ (State) ______ (ZIP)

Are you the Scout of a Legionnaire, Sons of The American Legion or American Legion Auxiliary member? _____ If yes, please complete the following:

(Name of Member)

(Relationship) (Membership No)

Eligibility Requirements

THE NOMINEE MUST:
• Be either a registered active member of a Boy Scouts of America unit that is chartered to an American Legion post, American Legion Auxiliary unit or Sons of The American Legion squadron.

OR
• Be a registered active member of any chartered Boy Scouts of America unit and have a parent or grandparent possessing up-to-date membership in The American Legion or Sons of The American Legion or American Legion Auxiliary, and in the case of a recently deceased member, their membership for the year immediately prior to the current year may be used.

AND
• Received the Eagle Scout Award.
• Received a Scouts BSA or Venturer Religious Emblem.
• Have demonstrated practical citizenship in church, school, Scouting and community.
• Have reached their 15th birthday and be enrolled in high school at the time of selection.
• Applied through the department (state) in which their Scout unit is chartered.

APPLICANTS: DO NOT SEND THIS APPLICATION DIRECTLY TO NATIONAL HEADQUARTERS. SUBMIT TO YOUR AMERICAN LEGION DEPARTMENT (STATE) HEADQUARTERS.