



## TROOP OF THE YEAR AWARD

TROOP # \_\_\_\_\_ CHARTERED ORGANIZATION \_\_\_\_\_

COMMITTEE CHAIR \_\_\_\_\_ SCOUTMASTER \_\_\_\_\_

PHONE #: \_\_\_\_\_ COM. CHAIR EMAIL: \_\_\_\_\_

\_\_\_\_\_ # OF YOUTH \_\_\_\_\_ # OF ADULTS \_\_\_\_\_ % OF FAMILIES RECEIVING BOYS LIFE

PERSON MAKING NOMINATION: \_\_\_\_\_ DATE: \_\_\_\_\_

EMAIL: \_\_\_\_\_

PHONE #: \_\_\_\_\_ POSITION: \_\_\_\_\_

IS THE SCOUTMASTER FULLY TRAINED? YES / NO

ARE ASSISTANT SCOUTMASTERS FULLY TRAINED? YES / NO PERCENTAGE OF ASM'S TRAINED \_\_\_\_\_

WHAT WAS THE TROOP JOURNEY TO EXCELLENCE RATING? GOLD SILVER BRONZE

DID THE UNIT HAVE AN OPEN HOUSE FOR RECRUITMENT? YES / NO DATE OF EVENT \_\_\_\_\_

PERCENTAGE OF THE YOUTH ADVANCING THIS YEAR? \_\_\_\_\_ COURT OF HONORS HELD # \_\_\_\_\_

HOW MANY EAGLE SCOUTS FROM THE TROOP? # \_\_\_\_\_

DID THE TROOP HAVE REGULAR MEETINGS? YES / NO HOW MANY MEETINGS WERE HELD # \_\_\_\_\_

WERE MEETINGS PLANNED AND LEAD BY YOUTH YES / NO

DID UNIT HOLD REGULAR ACTIVITIES? YES / NO ACTIVITIES # \_\_\_\_\_ PLANNED BY YOUTH YES / NO

HOW MANY NIGHTS OF CAMPING DID THE TROOP AVERAGE PER SCOUT? # \_\_\_\_\_ OF CAMPING NIGHTS PER SCOUT

DID THE UNIT DO SERVICE PROJECTS? YES / NO # OF SERVICE PROJECTS \_\_\_\_\_ YOUTH LEAD YES / NO

DID THE TROOP COMMITTEE HOLD REGULAR MEETINGS? YES / NO HOW MANY MEETINGS WERE HELD \_\_\_\_\_

PLEASE WRITE A BREIF ACCOUNT OF WHY THIS TROOP IS THE BEST TROOP IN THE COUNCIL. YOU MAY USE ADDITIONAL SPACE IF NEEDED.