



**SCOUTS CANADA  
NORTHERN LIGHTS COUNCIL  
Youth Recognition Application Form**



**Recipient's Information**

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

Group: \_\_\_\_\_

Section (circle one)    Scouts                      Venturers

Age: \_\_\_\_\_                      Date of Birth: \_\_\_\_\_

**Award to be Received**

Chief Scout's Award: \_\_\_\_\_                      Queen's Venturer Award: \_\_\_\_\_

**Parent/Guardian Information**

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

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

Postal Code: \_\_\_\_\_                      Telephone: (\_\_\_\_) \_\_\_\_\_

**Troop Scouter/Company Advisor Information**

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

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

Postal Code: \_\_\_\_\_                      Telephone: (\_\_\_\_) \_\_\_\_\_

Approval of Award: We certify that the requirements for the award have been completed according to the section handbooks.

Scouter/Advisor: \_\_\_\_\_                      Date: \_\_\_\_\_

Court of Honor/Company Exec: \_\_\_\_\_                      Date: \_\_\_\_\_

Note that no interview is required by the Commissioner.  
Please forward this form by mail, fax or email to: **Attention Council Commissioner**

Mail: Adventure Centre                      fax: (780) 451-5333  
14205 - 109 Ave NW  
Edmonton AB, T5N 1H5                      email: [northernlights@scouts.ca](mailto:northernlights@scouts.ca)

Council Commissioner: \_\_\_\_\_                      Date: \_\_\_\_\_