

Recommendation for Lifesaving or Meritorious Action Award Form

INSTRUCTIONS:

1. **Please TYPE all submissions.** Additional forms can be found on the council website (www.cpcbsa.org)
 - **To Use this Form:**
 - Open and/or download this document to your computer.
 - Type in requested information.
 - Print.
 - Attach picture of the nominee.
 - Send application to the Program Director of Cascade Pacific Council.
2. **REQUIRED DATA FOR ALL CASES.** Enclose the following personally prepared and **SIGNED** statements on a **separate piece of paper**, which are **required for all cases: (TYPE ALL STATEMENTS)**.
 - Personally prepared and **signed** statement by person performing action, describing the incident.
 - Personally prepared and **signed** statement by the rescued person, if any.
 - Personally prepared and **signed** statement by each witness, describing the action as he or she recalls the details. Include name, address, and phone number of all witnesses.
 - Glossy photo of the individual who made the rescue (5" x 7" desired).
3. Provide any attachments, newspaper clippings, etc which pertain to the case.
4. All recognitions are reserved for members who were registered at the time of action. **No such member should be encouraged to submit an application on his or her own behalf.**
5. Unless there are unusual circumstances that account for the time lapse, **NO** application will be considered after **an lapse of 6 months** from the action without written explanation from the Scout Executive or adviser to the Advancement' Process and Review committee.
6. The entire application **MUST** be completed before submission.

"National awards for lifesaving and meritorious action are meant as recognition for **ACTION BEYOND THE ORDINARY**. If the act to be recognized is one that most persons would consider a responsibility, the recipient of such a national award could be subject to real embarrassment."

INFORMATION ABOUT THE NOMINEE: (Personally prepared and **signed** statement by person performing action, describing the incident and make sure the name is spelled correctly).

Name:

Address:

City / St / Zip: Phone: () H/ W E-Mail:

Current Scouting Position/Rank: Unit Type & No.: District:

Age (at time of act): Approximate Height: Approximate Weight:

Parents Name: Phone: () H/ W E-Mail:

Unit Leader Name:

Address:

City / St / Zip: Phone: () H/ W E-Mail:

INFORMATION ABOUT THE RESCUED PERSON: (Personally prepared and **signed** statement by the rescued person, if any).

Name:

Address:

City / St / Zip: Phone: () H/ W E-Mail:

Age (at time of act): Approximate Height: Approximate Weight:

Name and location of where action occurred:

Date of incident: Time of incident:

Is there a photograph of the rescuer available if needed: Yes/ No

INFORMATION ABOUT WITNESSES: (Personally prepared and **signed** statement by each witness, describing the action as he or she recalls the details).

How many witnesses are there to the event?

Name:

Address:

City / St / Zip: Phone: () H/ W E-Mail:

Name:

Address:

City / St / Zip: Phone: () H/ W E-Mail:

Name:

Address:

City / St / Zip: Phone: () H/ W E-Mail:

SUMMARY OF THE ACTION: (Please give a detailed statement of the event and whether or not the rescuer's life was placed in jeopardy. Be as complete and specific as possible. Attach additional pages as necessary. Type all statements).

SUBMITTED BY:

Name:

Address:

City / St / Zip:

Day Phone: () Eve Phone: () E-Mail:

Best method of contact Best times to contact: