

ES-KAIELGU LODGE - Inland Northwest Council #611 - 411 W. Boy Scout Way - Spokane, WA 99201

## ADULT CANDIDATE NOMINATION

Name: (First)	_ (M.I.) (La	ast)	
Mailing Address: (Street / PO Box)		City)	_ (State) (Zip)
Phone: Email:		Da	ate of Birth:
Unit #: (Troop) (Team) District:	P	osition:	
Scout as a youth: □Yes □No Rank Achieved:		_ Scouter's Key □Yes □Nc	Wood Badge: □Yes □No
Years registered as an adult: Adult po	ositions held:		
Vocation: Sp	pecial Interests: _		
Civic and Church organizations / honors:			

\*\*\* If your unit elected at least (1) youth, the Unit Committee may nominate (1) adult (male or female) 21 years of age or older for consideration for membership in the Order of the Arrow. The number of adults nominated can be no more than (1/3) of the number of youth candidates elected, rounded up where the number of youth candidates is not a multiple of (3). In addition to the (1/3) limit, the unit committee may nominate the currently serving unit leader (but not assistant leaders), as long as he or she has served as unit leader for at least the previous twelve months \*\*\*

The following conditions are the basis for candidate nomination and must be fulfilled to be considered. Make a brief statement regarding the individual in the space provided below each requirement.

- 1) Selection of this adult is based upon his or her ability to perform the necessary functions to help the Order of the Arrow fulfill its purpose:
- 2) This adult will be an asset to the Order of the Arrow because of demonstrated abilities that fulfill the purpose of the Order in the following manner: (Basic Order of the Arrow information can be found at HTTP//www.oa-bsa.org/misc/basics/):
- 3) The camping requirements that apply for youth candidates also apply to adult candidates, and must have been fulfilled within the most recent (2) year period for nomination. The requirement of a minimum of (15) days & nights of camping, which must include (6) days and (5) nights of resident camping (all of which are approved and under the auspices and standards of the B.S.A), was fulfilled as follows:

## \*\*\* ADULT CANDIDATE NOMINATION / (name)\_\_\_\_

4) This adult leader's membership will provide a positive role model for the growth and development of the youth members of the Order of the Arrow because:

Unit Committee Nominations				
Committee Chair (or designee) Name (printed):				
Committee Chair (or designee) signature:*		Date:		
Contact Phone Number:				
District or Council Nominations				
Nominator's Name (printed):				
Nominator's signature:*	Date:			
Contact Phone Number:	Position:			
*May be left blank if submitting this form electronically. Be sure to include contat information in case verification is necessary.				
For Council Selection Committee Use Only	Selected $\Box$	Not Selected 🗖		
Authorized signatures and dates				
Lodge O.A. Professional Advisor:		Date:		
Lodge Lay Advisor:		Date:		
Council Executive:		Date:		

Comments:

## COMPLETED FORMS MUST BE SENT TO:

eskaielguadultelections@gmail.com

## <u>After review</u> by the selection committee please send either approved or disapproved forms to: eskaielguadultelections@gmail.com

so that the approved nominee can be informed of upcoming Service and Induction dates.