

**VENTURE CREW ADVISOR OF THE YEAR AWARD – Nomination Form  
(Due by May 14, 2019)**

**Name of Nominee (Advisor):** \_\_\_\_\_

**Advisor Information:**

- Number of years as Advisor of this unit \_\_\_\_\_
- Training taken:
  - This is Scouting & Fast Start            Y / N    Date: \_\_\_\_\_
  - Venture Advisor Specific                Y / N    Date: \_\_\_\_\_
  - Powder Horn Training                    Y / N    Date: \_\_\_\_\_
  - Hazardous Weather Training            Y / N    Date: \_\_\_\_\_
- Date awarded the Unit Leader of Merit Award \_\_\_\_\_ *(If applicable)*
- Training/Tenure Awards Received:
  - Advisor’s Key                                Y / N    Date: \_\_\_\_\_
  - Scouter’s Training Award                Y / N    Date: \_\_\_\_\_
  - Wood Badge                                  Y / N    Date: \_\_\_\_\_
- Number of Roundtables attended in 2018 \_\_\_\_\_

**Other Scouting Positions Held: (Use a separate sheet of paper if needed and attach to this form)**

Position	Dates	Position	Dates

**Other Scouting Awards Received:** \_\_\_\_\_

**Attach on a separate sheet why this person is a good candidate for Venture Crew Advisor of the Year. Areas to address include how the Advisor uses the key methods to deliver the aims of Scouting in the Crew.**

1. Aims of Scouting – citizenship training, character development, and personal fitness.
2. Key Methods of Scouting –
  - a. Advancement (Self-reliance / ability to help others / challenge)
  - b. Ideals (Oath / Law / Motto / Slogan)
  - c. Patrols (Peer groups / elected representation / activities)
  - d. Outdoors (All outdoor programs)
  - e. Adult Association (Image / role model / example)
  - f. Personal Growth (Good Turn / service projects / religious emblems)
  - g. Leadership Development (Leadership skills and practice / citizenship)
  - h. Uniform (Commitment to aims / identity)

**Unit Information:**

- The unit’s 2018 Journey to Excellence results submitted with your Charter will be reviewed.
- Attach the current unit calendar (9/2018 - 8/2019) to this application
- Other information about your unit that should be considered:

\_\_\_\_\_

**Submitted by:** \_\_\_\_\_

**Position:** \_\_\_\_\_

**Home Phone #:** \_\_\_\_\_

**Cell Phone #:** \_\_\_\_\_

**Work Phone #:** \_\_\_\_\_

**Forward completed application to:**

**Tracy Dioguardi, District Awards Committee Chair**

**Address: 44 Sycamore Street, Massapequa, NY 11758 / e-mail: bsabuffalo@gmail.com**