



**PRELIMINARY APPLICATION FOR A LIFESAVING OR MERITORIOUS AWARD**

*This form is to be completed and submitted to the Northwest Suburban Council as soon as possible after the incident. It will be forwarded to the Council Advancement Committee for consideration. The Council Advancement Committee will determine the appropriate award. Please include as much information as possible, including the full address for witnesses. Additional material and information may be submitted after the form is turned in.*

1. Name of individual being recommended for award \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_

2. Age at time of incident \_\_\_\_\_ Circle one: Cub Scout Boy Scout Venturer Unit No. \_\_\_\_\_

3. Rank \_\_\_\_\_ If adult, position in Scouting \_\_\_\_\_

4. Witness Name \_\_\_\_\_ Age \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Witness Name \_\_\_\_\_ Age \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Witness Name \_\_\_\_\_ Age \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

5. Name of Rescued Person \_\_\_\_\_ Age \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

6. Date and time incident took place \_\_\_\_\_

7. Name and location of place where event occurred \_\_\_\_\_

\_\_\_\_\_

8. **On a separate piece of paper summarize the event and attach it to this application.**

*If the submission of a national award application is authorized by the Council Advancement Committee, a personally prepared and signed statement describing the event will be required of: 1) the person performing the act; 2) the rescued person (if possible); and 3) each witness. In addition, any available newspaper articles, photos, or other documentation will be required.*

Submitted by: \_\_\_\_\_ Position in Scouting \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone # \_\_\_\_\_