



ARCHDIOCESE FOR THE MILITARY SERVICES, USA

Catholic Committee on Scouting Bronze Pelican Award Application

Eligibility

Any registered adult serving in the Scouting Program. The award maybe given to clergy, religious, or laity. A Scouter does not earn the Bronze Pelican Award but is recommended by another person, through this application to the Archdiocese for the Military Services, USA, Catholic Committee on Scouting for review.

Purpose

The Bronze Pelican Award is awarded by the Archdiocese for the Military Services, USA, Catholic Committee on Scouting. The award recognizes the recipient's outstanding contribution to the spiritual development of Catholic youth in the program of Scouting America with particular emphasis on archdiocesan activities.

Requirements

Work accomplishment and dedication rather than a specific number of years in Scouting is the strongest criteria for receiving this emblem. The suggestion is four of years of current and active experience in Scouting, chapel or archdiocesan activities to be nominated for the Bronze Pelican Award. A completed nomination form must be submitted to the Archdiocese for the Military Services, USA, Catholic Committee on Scouting. The committee welcomes all nominations and will gladly assist you through the guidelines.

Presentation

The emblem is presented at the local installation, preferably by an AMS endorsed priest. The application is designed to help the sponsor document sufficient information about the candidate so that the Archbishop or his representative may review the candidate's contributions and accomplishments. The guidelines are a suggested list of information that could be included in the application. The candidate must be active in the promotion of the Catholic Faith in the Scouting Community, and could meet several of the following guidelines, or show significant reason why other criteria should be used. The sponsor should complete this application. Family members may assist the sponsor in completing the information.

Bronze Pelican Award Application
Archdiocese for the Military Services, USA, AMS Catholic Committee on Scouting

Nominee

Name: _____ Name of Spouse: _____

Address: _____ City: _____ State: _____ Zip: _____

Diocese: Archdiocese for the Military Services, USA Chapel/Installation: _____

Catholic Scouting Council: _____ Registered in Scouting as: _____

Scouting District: _____ Pack, Troop, Ship or Venture Crew Number _____

Occupation and Employer: _____

Home Phone: (____) _____ Business Phone (____) _____

E-mail Address: _____

Sponsor

Name: _____ Date Submitted: _____

Address: _____ City: _____ State: _____ Zip: _____

Home Phone: (____) _____ Business Phone (____) _____

E-mail Address: _____

Sponsor Signature: _____

Name of AMS Priest supporting this nomination: _____

AMS Priest signature: _____

☐ Attach a statement detailing why you are nominating this individual. Please include summary of awards, roles held in the chapel, other Scouting America activities, roles in other community organizations. Remember to focus on services to Catholic Scouting America.

- Actively Promotes Cub Scout, Scout, Sea Scouting, or Venture Scout participation in any of the following activities: Catholic Emblems, Catholic Days of Reflection, Catholic Retreats, Scout Sundays, other events.
- Responsible for building or maintaining a reverent Scout unit sponsored by a Catholic organization.
- Mentoring Scouts by being a Christian example within the unit for all activities and models good citizen as one who lives the ideals of Scouting.
- Provides servant leadership in promoting Scouting for all youth.
- Actively Promotes Unit participation in Catholic Committee activities which creates a better understanding of the aims and ideas of Scouting as Youth Ministry.
- Active in the Church other than Scouting.

Mail the completed and signed application with supporting documents to:

Archdiocese for the Military Services, USA, Office of Evangelization, Attn: Scouting, P.O. Box 4469, Washington, DC 20017

For Office Use Only:

Catholic Committee Representative who received form: _____

Date received: _____ Date reviewed: _____ Committee Decision: _____