

Youth Candidate Election Report

This form is to be completed by the unit leader prior to the election.
 All election results are final. No substitutions may be made at a later date for any reason. (PLEASE PRINT)

Troop Crew Ship

Unit Number: _____

Record of Election

- | | | |
|--|-------|------------------|
| 1. Number of registered active youth members in unit | _____ | |
| 2. Number of Scout members present at election | _____ | |
| 3. Number of Scouts eligible for membership | _____ | |
| | | Ballot 1 |
| 4. Number of ballots turned in | _____ | Ballot 2* |
| 5. Number of votes required to be elected | _____ | _____ |
| 6. Number of Scouts elected | _____ | _____ |
- * Ballot 2 held only if no one elected on Ballot 1

I certify that the youth member listed below are qualified for election to membership in the Order of the Arrow. Each holds at least the appropriate rank and has met the order's current camping requirements as stated in the most recent issue of the lodge election procedures or the Order of the Arrow Handbook. I certify to their Scouting spirit, adherence to the Scout Oath and Law, and participation in unit activities. I understand that names may not be added or removed once certified.

 Unit Leader Signature _____
 Date

ALL fields must be completed by the unit before results can be submitted.

PLEASE PRINT CLEARLY

Elected

- | | | | | | |
|-----------------------------|-------|----------------|-----------|----------|----------|
| 1. <input type="checkbox"/> | _____ | _____ | _____ | _____ | _____ |
| | Name | E-Mail Address | Phone Num | Birthday | BSA ID # |
| 2. <input type="checkbox"/> | _____ | _____ | _____ | _____ | _____ |
| | Name | E-Mail Address | Phone Num | Birthday | BSA ID # |
| 3. <input type="checkbox"/> | _____ | _____ | _____ | _____ | _____ |
| | Name | E-Mail Address | Phone Num | Birthday | BSA ID # |
| 4. <input type="checkbox"/> | _____ | _____ | _____ | _____ | _____ |
| | Name | E-Mail Address | Phone Num | Birthday | BSA ID # |
| 5. <input type="checkbox"/> | _____ | _____ | _____ | _____ | _____ |
| | Name | E-Mail Address | Phone Num | Birthday | BSA ID # |
| 6. <input type="checkbox"/> | _____ | _____ | _____ | _____ | _____ |
| | Name | E-Mail Address | Phone Num | Birthday | BSA ID # |
| 7. <input type="checkbox"/> | _____ | _____ | _____ | _____ | _____ |
| | Name | E-Mail Address | Phone Num | Birthday | BSA ID # |

Unit Leader:

Name: _____

Address: _____

City and Zip: _____

Phone: (H) _____ (W) _____

Preferred Callout: _____

Election Information

Date Election Held: _____ Location: _____

Election Team Name Printed _____

Election Team Name Printed _____

Election Team Name Printed _____