Grand Lodge of Georgia F. & A. M.

EAGLE SCOUT AWARD APPLICATION

Name _____
As it appears on Eagle Scout Certificate

Address _____
Street or R.F.D. Address

_____
City, State, Zip Code

Telephone _____ E- mail _____

_____ _____
Troop, Team, Crew or Ship Council

_____
City, State, Zip Code

****** Date of, Time & Place "Court of Honor" Presentation *******

_____

Certification

By Applicant: All statements on this application are true and correct.
Signature of Applicant _____
Unit Approval: (personal signature)
Signature of Unit Leader _____

Signature of Unit Committee Chair _____

Scout Executive Approval _____ Date_____
Signature

Mail Completed Form to: Grand Secretary, 811 Mulberry Street, Macon, Georgia 31201
E-Mail: gsec@glofga.org
478-742-1475 (B), 478-742-1465 (FAX)

***** REQUIRED INFORMATION*****
Please submit application to the Grand Lodge Office at least 2 weeks, prior to Court of Honor, to give the Presenter of the Award time to make arrangements for the presentation.