

Unit: _____ District: _____ Date of Election: _____

These candidates were or will be called out on: _____ Page: ___ of ___

Village Adviser's Signature: _____

Complete the information below for each of youth elected (attach additional sheets if needed)

Name: _____ Phone: (____) _____

Address: _____

City: _____ Zip: _____ ScoutNet ID #: _____

Nickname: _____ Rank: _____ Age: _____ Date of Birth: _____

Email Address: _____
(If candidate is under the age of 13 provide parent/guardian's email address)

Name: _____ Phone: (____) _____

Address: _____

City: _____ Zip: _____ ScoutNet ID #: _____

Nickname: _____ Rank: _____ Age: _____ Date of Birth: _____

Email Address: _____
(If candidate is under the age of 13 provide parent/guardian's email address)

Name: _____ Phone: (____) _____

Address: _____

City: _____ Zip: _____ ScoutNet ID #: _____

Nickname: _____ Rank: _____ Age: _____ Date of Birth: _____

Email Address: _____
(If candidate is under the age of 13 provide parent/guardian's email address)

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Address: _____

City: _____ Zip: _____ ScoutNet ID #: _____

Nickname: _____ Rank: _____ Age: _____ Date of Birth: _____

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Incomplete forms will NOT be honored and will be returned to be completed