

THE
AMERICAN LEGION
DEPARTMENT OF MISSISSIPPI



**“Eagle Scout of the Year”
Award**



Program Guide for Post Boy Scout Chairman

The American Legion
Department of Mississippi
P.O. Box 688
Jackson, MS 39205-0688
email: legion27@bellsouth.net
phone: 601-352-4986
fax: 601-352-1429

Dr. Charles W.L. Hall, Chairman
Boy Scout Committee
34 Shoemake Road - Hall Manor
Lumberton, MS 39455-7726
email: charleswlhall@yahoo.com
phone: 601-796-2087
fax: 601-796-4227

Program Purpose

The American Legion Department of Mississippi “*Eagle Scout of the Year*” Award program serves to recognize the highest level of leadership and achievement on the part of Boy Scouts who on a constant basis give so much of themselves on behalf of community service and helping others.

Many programs within Mississippi communities conducted by The American Legion and other organizations are designed to recognize and benefit the children of Mississippi.

However, no program known recognizes the service and work performed by Eagle Scouts, not only in assisting our organizations with these programs, but more importantly recognizing the contributions made by Scouts on a day-to-day basis.

Just like veterans, Eagle Scouts are unsung heroes of this nation who build our nation’s future by working with the youth of today.

The Department Boy Scout Committee believes the presenting of “*Eagle Scout of the Year*” awards within the Department of Mississippi will serve to strengthen the bonds that exist between The American Legion, the Boy Scout Councils of Mississippi, and the scouts and scout leaders of our communities.

It is felt this program will increase the recognition factor and exposure of Mississippi youth and The American Legion Department of Mississippi within our communities for years to come.

Program Criteria and Structure

- 1. The American Legion Department of Mississippi “*Eagle Scout of the Year*” Award is open to all Eagle Scout District winners of that calendar year in the Department of Mississippi.**
- 2. Participation in the “*Eagle Scout of the Year*” program is open to every post in the Department. Scouts eligible under National rules may submit nominations directly to District Commanders, however, they may only do so in the District in which they live or attend school.**
- 3. As established by the Department Boy Scout Committee, the levels of awards for this program will be:**
 - A. Department “*Eagle Scout of the Year*”**
 - B. District “*Eagle Scout of the Year*”**
 - C. Posts may provide awards of their own selections but are not mandated to do so.**
- 4. Each District Commander is asked to present a District “*Eagle Scout of the Year*” Award certificate and silver medal provided by the Department Boy Scout Committee to his District winner.**
- 5. The Department of Mississippi “*Eagle Scout of the Year,*” as selected by the Department Boy Scout Committee from all District winners, will receive the Department “*Eagle Scout of the Year*” Award certificate and gold medal at an appropriate time and will receive recognition in the Mississippi *Legion’Aire* news.**
- 6. The Department winner will be nominated for The American Legion “*Eagle Scout of the Year*” National Award.**

THE
AMERICAN LEGION
DEPARTMENT OF MISSISSIPPI
“EAGLE SCOUT OF THE YEAR”
NOMINATION FORM

Scout’s Name: _____

Address: _____

(Street)

(City)

(State)

(Zip)

Boy Scout Council: _____

(Name and Number)

Address: _____

(Street)

(City)

(State)

(Zip)

(Scout Executive’s Name)

Council Phone: _____

Council Fax: _____

Council Email: _____

Note: Please attach a completed National “Eagle Scout of the Year” Nomination Form.

Important: DO NOT SEND DIRECTLY TO
DEPARTMENT HEADQUARTERS.

“Eagle Scout of the Year” Judge’s Scoring Sheet

Eagle Candidate’s Name: _____

A. Total Number of Merit Badges Earned: _____

B. Total Number of Leadership Positions Held: _____

C. Total Hours Committed to Public Service: _____

D. Current Grade in School: _____

Judge’s Initials: _____ **Total Points:** _____
(Maximum of 100 Points)

Date: _____

ENDORSEMENTS

Scout Executive:

The above named Eagle Scout is qualified in every respect to represent The American Legion and this Boy Scout Council and has our recommendation.

Date: _____ **Scout Executive:** _____

(FORWARD TO AMERICAN LEGION DISTRICT COMMANDER)

District Commander:

The above named Eagle Scout is approved by District ____ as qualified for nomination of The American Legion “Eagle Scout of the Year.”

Date Received: _____ **District Commander Init:** _____

CERTIFICATIONS

“Eagle Scout of the Year” District Award Certification

To be completed by the District Commander:

I, the undersigned, certify that _____
is the awardee of the District ____ “Eagle Scout of the Year” Award for the
year _____.

District Adjutant

District Commander

Date: _____

Date: _____

(FORWARD TO DEPARTMENT BOY SCOUT CHAIRMAN)

Date Received: _____ Department Chairman Init: _____

“Eagle Scout of the Year” Department Certification

This is to certify that the above named Eagle Scout is the awardee of
The American Legion Department of Mississippi “Eagle Scout of the Year”
Award for the year _____.

Department Adjutant

Department Chairman

Date: _____

Date: _____