1. Be a registered, active Boy Scout in your Post area.

2. Must meet physical requirements of trip medical certificate.

3. Trip must be to a recognized National Boy Scout High Adventure Area or to a National or International Jamboree.

4. Must be a STAR Scout or higher (in rank).

5. Age limitation between 14 and 18 years. Prior High Adventure award winners may not apply for 2nd year.

6. Must have been or now is a leader within his troop.

7. Must be of good moral character, show interest in religion, community, state and nation.

8. A letter or letters of recommendation submitted by adult citizen in the community covering #7 in the above requirements and any other points pertinent to the nominee's activities (church, school, community, etc.)

9. The winning applicant(s) shall report to the Department in person to receive scholarship award. The sponsoring (institution and Post) shall arrange for presentation of Scout.

10. The applicant is responsible for making his own trip arrangements.

11. Upon returning from a High Adventure Trip, Scout must make his report to the American Legion Department of North Carolina at designated Conference, Fall or Spring.

12. Should use the Scout application from the Department Office.

13. Applications should be submitted no later than October 10. Award winners will be chosen at Fall Conference. Please do not submit nominations in a binder or notebook of any kind.

Mail To:
Boy Scout Committee Chairman
The American Legion Department of NC
PO Box 26657
Raleigh, NC 27611

SCHOLARSHIP AWARDS WILL BE BASED ON UP TO A $1,200.00 SCHOLARSHIP PER DIVISION, TO BE FORWARDED TO THE SPONSORING AMERICAN LEGION POST FOR PRESENTATION TO WINNING APPLICANT.
DEPARTMENT OF NORTH CAROLINA  
AMERICAN LEGION  
BOY SCOUT HIGH ADVENTURE AWARD  
NOMINATION APPLICATION

<table>
<thead>
<tr>
<th>POSITION PLACEMENT</th>
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</thead>
<tbody>
<tr>
<td>(To Be Completed By The American Legion)</td>
</tr>
</tbody>
</table>

District No. __________________________ Place Of __________________________ Submitted  
Division No. __________________________ Place Of __________________________ Submitted  
Department of __________________________ Place Of __________________________ Submitted  
National Headquarters __________________________ Place Of __________________________ Submitted

Nominee’s Name: __________________________ Phone No.: (____) __________________________  
Address: __________________________  
(Street)  
(City)  
(State)  
(Zip Code)  
Age: _______ Date of Birth: _______ (Day) _______ (Month) _______ (Year)  
Height: _______________ Weight: _______________  

FULL NAME AND ADDRESS OF THE AMERICAN LEGION POST SPONSORING YOU. (Required) (Only one applicant per post)  
Post Commander Must Sign Form  
(Name)  
(Post No.)  
(Street)  
(City)  
(State)  
(Zip Code)  
(Post Commander’s Signature)

ELIGIBILITY REQUIREMENTS

THE NOMINEE MUST:

___ Be a registered, active member of a Boy Scout Troop or Varsity Scout Team;  
___ Applicant must be sponsored by an American Legion Post (One applicant per post)  
___ Meet Trip Medical Requirements;  
___ Have received the STAR Scout Award;  
___ Be an active member of his religious institution;  
___ Have rendered outstanding service to his religious institution, school and community;  
___ Have demonstrated practical citizenship in church, school, Scouting and community (i.e. Student Council President or Representative, local Teen Club chairman, leader in community-wide service projects, participation in sports, Senior Patrol Leader, Junior Assistant Scoutmaster, etc.)  
___ Have reached his 14th birthday, but not his 18th, by June 30th.  
___ Submit at least one letter or recommendation and testimony with Nomination Application.
QUALIFICATIONS

PLEASE PRINT OR TYPE

A. HIGH SCHOOL RECORD

Grade______________ Name of High School ___________________________________________________

High School Clubs, Teams and Organizations Honors, Letters, or Offices Held

_________________________________________________

_________________________________________________

_________________________________________________

_________________________________________________

_________________________________________________

B. Community Participation Record

Organization Offices

_________________________________________________

_________________________________________________

_________________________________________________

Community Service Participation __________________________________________________________

_________________________________________________

C. Religious Record

Denomination __________________________________________________________

Name of Religious Institution _________________________________________________

Religious Youth Organizations Honors and/or Offices Held

_________________________________________________

_________________________________________________

_________________________________________________

Name of Religious Emblem (Award) Received ________________________________________
D. Scouting Record

<table>
<thead>
<tr>
<th>Cub Scout</th>
<th>Years</th>
<th>Unit No.</th>
<th>Sponsor</th>
</tr>
</thead>
<tbody>
<tr>
<td>Boy Scout</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Varsity Scout</td>
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<td></td>
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</tr>
</tbody>
</table>

Highest Rank Received: Palms

Leadership Positions Held:

Cub Scout Pack

Boy Scout Troop

Varsity Scout Team

Camp Staff

Other

Other Activities (Jamborees, Order of the Arrow Conference, etc.)

E. Career Interests

F. Attachments

One Required Letter of Recommendation and Testimony:

_____ Religious  _____ Community

______ School  ______ Scouting

NOTE: Additional letters of recommendation and testimony may be included with this application.