



Certification of Completion

Community Organization Award



Nominee's Name _____
Address _____
City _____ State _____ Zip _____
Phone _____ E-mail _____
MCL Detachment _____
BSA Registered Position(s) _____
BSA District and Council _____

Nominee's Signature _____ Date Signed _____

BSA District/Council Executive Endorsement:

I certify that the nominee has rendered distinguished and meritorious service to scouting.

Name _____
BSA Phone Number _____ BSA Email _____

BSA Signature _____ Date Signed _____

Marine Corps League Detachment/Department Commandant Approval:

I certify that the nominee has rendered distinguished and meritorious service to the Scouting on behalf of the Marine Corps League.

Name _____
Phone _____ E-mail _____
MCL Detachment/Department _____
Address _____
City _____ State _____ Zip _____
Phone _____ E-mail _____

Signature _____ Date Signed _____

Marine Corps League National Boy Scout Committee Approval:

The Nominee has met the requirements for the BSA's Community Organization Square Knot and congratulatory letter has been completed and sent to the Nominee's Detachment/Department for presentation.

Name _____
Phone _____ E-mail _____

Signature _____ Date Signed _____