

Community Service Bar Application

Please complete and submit the following application to your Volunteer Support Specialist. We will review your application and you will be notified of the status via email within 2-3 weeks.

Note: After receiving approval, it is your responsibility to work with your troop/group leader to ensure all elements of the service were completed. It is also the troop/group leader or family's responsibility to purchase the Community Service Bar award.

Name: _____

Troop/group # _____

Address: _____

City, State, Zip: _____

Current grade: _____ E-mail: _____

Troop/group leader name and email:

Name of partnering organization:

Name & email of staff at partnering organization:

Give a brief description of the training that will be provided by the partnering organization before you begin your service:

Give a brief description of the community service you will provide to the partnering organization. (Min. 20 hours)

Submit completed form to your
Volunteer Support Specialist

For Office Use Only

Date Received: _____

Approved _____ Denied _____

If denied, attach letter with explanation.

Staff Initials: _____