Supernova Award Application

Please print or type all information. Give the month, day, and year for all dates.

Part 1 – Personal Data

Name _____

Address _____

City _____ State _____ Zip code _____

Phone _____ Date of birth _____ Unit _____

Email _____

Council _____ Region _____

Mentor's name _____ Phone _____

Email _____

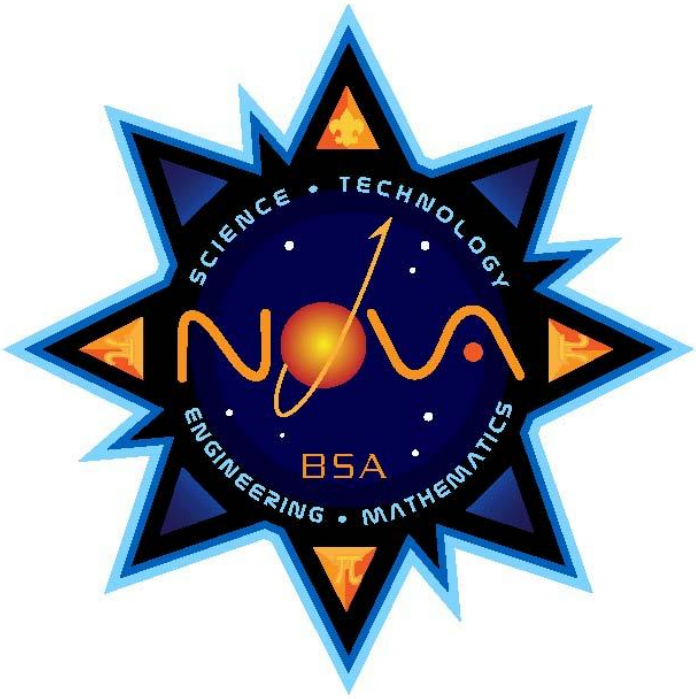
Part 2 – Award

This is for a

- ☐ Cub Scout
- ☐ Boy Scout
- ☐ Venturer

Supernova Awards

- ☐ Dr. Luis W. Alvarez (Cub Scouts)
- ☐ Dr. Charles H. Townes (Webelos Scouts)
- ☐ Dr. Bernard Harris (Bronze—Boy Scouts)
- ☐ Thomas Edison (Silver—Boy Scouts)
- ☐ Dr. Sally Ride (Bronze—Venturers)
- ☐ Wright Brothers (Silver—Venturers)
- ☐ Dr. Albert Einstein (Gold—Venturing)



Supernova Award Application

Please print or type all information. Give the month, day, and year for all dates.

Part 2 – Approval

Statement of Applicant

I have thoroughly read the requirements for this award. I have worked closely with my mentor on each aspect of this award. I request consideration for receiving the Supernova Award.

Applicant's signature _____ Date _____

Mentor's Approval

I have worked closely with the applicant named above in the execution of the award requirements. I have reviewed this application and recommend that the applicant receive the Supernova Award.

Mentor's signature _____ Date _____

Unit leader's signature _____ Date _____

Council/District Advancement Committee's Approval

The council/district advancement committee has reviewed this application and determined that the applicant has met all requirements for the Supernova Award and has this committee's approval and endorsement.

Chair's signature _____ Date _____

Scout Executive's Approval

I have reviewed this application and approve the awarding of the Supernova Award to this applicant.

Scout executive's signature _____ Date _____