



Application for Queen's Venturer Award



REQUIREMENTS

1. 9 Venturer Award 9 Equivalent skills & knowledge
Date completed _____
2. 9 St. John Ambulance Standard Level 9 Red Cross Standard Level
Date completed _____
3. 9 World Conservation Award
Date completed _____
4. 9 Service Skills
Choose one _____ Date completed _____
5. 50 hours service
#hrs _____ Date completed _____
#hrs _____ Date completed _____
6. Eight meetings as a youth leader: Section/Organization _____
Date completed _____
7. Leadership in a peer environment: Role _____
Date completed _____
8. 9 Blue Stage Religion in Life 9 World Religions
9 Demonstration of continuing spirituality Date completed _____

This certifies that to the satisfaction of the _____ Venturer Company, that _____ has completed all requirements of the Queen's Venturer Award, understands and will continue to do his/her best in his/her daily life, to live up to the Venturer Promise. He/She is aware of the special significance of the award and is a worthy example to all and will uphold the Honour of Scouting.

Company President _____ Date completed _____

DETAILS

(Please Print)

Venturer's Name _____
(First) (Middle) (Last)

Venturer's Address _____

Postal Code _____ Telephone _____

Name of parent(s) or
Guardian(s) _____

Venturer Advisor's
Name _____

Venturer Advisor's
Address _____

Postal Code _____ Telephone _____

Venturer Advisor's Signature _____
Date _____

DEADLINE FOR SUBMISSIONS IS SEPTEMBER 1st

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