

Youth Candidate Election Report

Troop _____ Scoutmaster _____ Town _____ District _____

<p style="text-align: center;"><u>Certification of Eligibility</u></p> <p>I certify that the Scouts listed on this report are qualified for election to membership in the Order of the Arrow. Each holds at least the rank of First Class Scout, and each has met the OA camping requirements. I certify their Scouting Spirit, adherence to the Scout Oath and Law, and participation in unit</p> <p>Number of Active Scouts _____</p> <p>Scoutmaster Signature _____</p> <p>Phone Number _____</p>	<p style="text-align: center;"><u>Election Record</u></p> <table style="width: 100%; border-collapse: collapse;"> <tr> <td></td> <td style="text-align: center;"><u>Ballot 1</u></td> <td style="text-align: center;"><u>Ballot 2 (if needed)</u></td> </tr> <tr> <td>Number of registered youth present (under 21 years old)</td> <td style="text-align: center;">_____</td> <td style="text-align: center;">_____</td> </tr> <tr> <td>Number of youth eligible for election</td> <td style="text-align: center;">_____</td> <td style="text-align: center;">_____</td> </tr> <tr> <td>Number of Ballots submitted</td> <td style="text-align: center;">_____</td> <td style="text-align: center;">_____</td> </tr> <tr> <td>Number of votes required for election</td> <td style="text-align: center;">_____</td> <td style="text-align: center;">_____</td> </tr> <tr> <td>Number of youth elected</td> <td style="text-align: center;">_____</td> <td style="text-align: center;">_____</td> </tr> </table> <p>* Ballot 2 used only if no one is elected on Ballot 1 *</p>		<u>Ballot 1</u>	<u>Ballot 2 (if needed)</u>	Number of registered youth present (under 21 years old)	_____	_____	Number of youth eligible for election	_____	_____	Number of Ballots submitted	_____	_____	Number of votes required for election	_____	_____	Number of youth elected	_____	_____
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Candidates

*Please list ALL eligible scouts – list full name; include city and zip code in address – Please PRINT CLEARLY
Use the back for additional names if needed*

Check If Elected	Name	Address	Phone	Email	Birth Date	Rank

OA Troop/Team Representative

Print Name _____
 Signature _____
 Date _____

OA Youth Member Conducting Election (if not the Representative)

Print Name _____
 Signature _____
 Date _____