

Directions: Fill in the following table for all eligible youth prior to the unit election

Date:	Unit:	Chapter:	Unit Leader		# of Active Registered Scouts:
			Name:	Email:	

	BSA ID Number	Last Name	First Name	Birth Date	Rank	Email	Elected
	Street Address	City	State	Zip	Phone	Parent Email	
1							
2							
3							
4							
5							
6							
7							
8							
9							

	BSA ID Number	Last Name	First Name	Birth Date	Rank	Email	Elected
	Street Address	City	State	Zip	Phone	Parent Email	
10							
11							
12							
13							
14							
15							

I certify that the above (and below) members are eligible and approve them as nominees for election as candidates to the Order of the Arrow	Unit Leader Signature	Date
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Directions : This table to be filled out by the Election Team

Number of Scouts present for the Election (50% minimum)	Number of Ballots turned in:	/2 equals # of votes required

Signatures of Election Team

Leader:	Member:	Member:
Member:	Member:	Member:

Copies to: unit leader, lodge secretary, chapter secretary, OA Lodgemaster