

# CHARTERED PARTNER AWARD



## PURPOSE

The Sam Houston Area Council, Boy Scouts of America, is seeking nominations of Chartered Partners that have demonstrated excellence in relationships.

One community-based organization from each district or division will be selected by the Council Relationships Committee to receive recognition each year.

## OBJECTIVES

- To encourage excellence in relationships between Chartered Partners and The Sam Houston Area Council.
- To provide examples of excellence in relationships from which others may learn.
- To create an annual recognition providing visibility for recipients of the award.

## ELIGIBILITY

Nominees are from religious bodies, educational groups, civic/service/fraternal associations, business/industry/labor, and military/veterans' organizations.

Nominees must charter a unit(s) within the Sam Houston Area Council boundaries.

## CRITERIA

The following are examples of criteria, a combination of which might make a possible candidate for this recognition. This list is not inclusive as there are many other areas that could be considered.

Evaluators will look for evidence of the following:

- Demonstrates outstanding or distinctive relationships beyond the normal expectation.
- Provides noteworthy service to youth, contributing to increased youth participation.
- Cooperates with the district and/or council.
- Involves the instructional head in the selection of quality unit leadership.
- Causes greater comprehension in the use of Scouting within the community organization.

## PROCESS

**Nominations must be received by December 31<sup>st</sup> of each year. Late applications cannot be accepted.** To help the reviewers please-

- Type or print clearly on the nomination form.
- Confine your responses to the space provided.
- Submit only one copy of the application per institution.
- Do not send unrequested material. It will not be reviewed or returned.

## RECOGNITION

The Chartered Partner will receive a plaque having the relationships logo and inscription plate bearing the recipient's name and date of recognition.

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Completed nomination forms, questions about the award, and request for additional applications should be directed to:

**RELATIONSHIPS DIRECTOR  
SAM HOUSTON AREA COUNCIL  
P. O. BOX 924528  
HOUSTON, TEXAS 77292-4528**

**PHONE: (713) 756-3375**

**NOMINATED BY:**

**NAME** \_\_\_\_\_ **SIGNATURE** \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

District \_\_\_\_\_

Telephone (\_\_\_\_) \_\_\_\_\_ Position \_\_\_\_\_

**SUPPORTED BY:**

**DISTRICT CHAIRMAN** \_\_\_\_\_ **SIGNATURE** \_\_\_\_\_

District Commissioner \_\_\_\_\_ Signature \_\_\_\_\_

District Executive \_\_\_\_\_ Signature \_\_\_\_\_

The nomination is confidential. To avoid disappointment, please do not advise the nominee. Thank you.

**Complete nominations should be submitted to:**

**RELATIONSHIP DIRECTOR**  
**SAM HOUSTON AREA COUNCIL**  
**P.O. Box 924528**  
**Houston, TX 77292-4528**

On \_\_\_\_\_, the Council Relationships Committee approved the nominee as worthy of this award.  
(date)

Signed \_\_\_\_\_  
(Vice Chairman Relationships)

Signed \_\_\_\_\_  
(Relationships Director)

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## NOMINATION FORM

Care should be taken that all of the information requested on this nomination form is provided. Incomplete submissions will not be reviewed. In completing this form, the information should be typewritten or printed. Letters submitted on behalf of the nominee are strongly encouraged and should be restricted to one page, single spaced typewritten endorsements. In the space provided on this form identifying the nominator and the supporters of the nomination, all signatures must be original signatures of the person involved.

**DEADLINE FOR NOMINATIONS IS: DECEMBER 31**

### NOMINEE:

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Address

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City State Zip

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Name of Institutional Head

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Position or Title Telephone

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<b>CHARTER(S):</b> Pack #	Tenure of Unit:	months/years
Troop #	Tenure of Unit	months/years
Team #	Tenure of Unit	months/years
Post #	Tenure of Unit	months/years
Ship #	Tenure of Unit	months/years
Crew #	Tenure of Unit	months/years

### SUPPORT DATA:

**EXPLAIN WHY THIS INSTITUTION SHOULD BE HONORED FOR EXCELLENCE IN RELATIONSHIPS. GIVE EVIDENCE AS TO HOW THE NOMINEE HAS: DEMONSTRATED OUTSTANDING OR DISTINCTIVE RELATIONSHIPS BEYOND THE NORMAL EXPECTATIONS, PROVIDED NOTEWORTHY SERVICE TO YOUTH, CONTRIBUTED TO INCREASED YOUTH PARTICIPATION, COOPERATED WITH THE DISTRICT AND/OR COUNCIL, INVOLVED THE INSTITUTIONAL HEAD IN THE SELECTION OF QUALITY UNIT LEADERSHIP, CAUSED GREATER COMPREHENSION IN THE USE OF SCOUTING WITHIN THE COMMUNITY ORGANIZATION, AND ANY ADDITIONAL PERTINENT INFORMATION. (ATTACH ADDITIONAL SHEETS IF NECESSARY)**

