



Certification of Completion

Community Organization Award



Nominee's Name _____
Address _____
City _____ State _____ Zip _____
Phone _____ E-mail _____
MCL Detachment _____
Registered Position(s) _____
District and Council _____

Nominee's Signature _____ Date Signed _____

Scouting America District/Council Executive Endorsement:

I certify that the nominee has rendered distinguished and meritorious service to Scouting.

Name _____
Phone Number _____ Email _____

Signature _____ Date Signed _____

Marine Corps League Detachment/Department Commandant Approval:

I certify that the nominee has rendered distinguished and meritorious service to Scouting on behalf of the Marine Corps League.

Name _____
Phone _____ E-mail _____
MCL Detachment/Department _____
Address _____
City _____ State _____ Zip _____
Phone _____ E-mail _____

Signature _____ Date Signed _____

Marine Corps League National Scout Committee Approval:

The Nominee has met the requirements for Scouting America's Community Organization Square Knot and congratulatory letter has been completed and sent to the Nominee's Detachment/Department for presentation.

Name _____
Phone _____ E-mail _____

Signature _____ Date Signed _____