INCORPORATED BY ACT OF CONGRESS

EAGLE SCOUT GOOD CITIZENSHIP AWARD APPLICATION

Eagle Scout's Name:					Troop #			
Address:								
City:	State: M			rland	Zip Code:			
Requester's Name:								
Primary Phone:				Circle:	Day	Evening	Cellular	
Secondary Phone:				Circle:	Day	Evening	Cellular	
Email Address:								
Name as it will appear on Certifi	icate:							
Eagle Scout Court of Honor Date*:					Time:			
* 30 days notice is necessary for Personal Presentation: Every 6 Mailing: The award certificate v	effort will be made	to have a	Marin					
Location of Eagle Court of	Honor:							
Building:						_ Floor:		
Address:								
City:		State: _	Mary	rland	Zip Co	ode:		
Please provide a physical addre	ess that can be loc	ated using	g a GP	S syste	m.			
Are there any special directions	to the location? F	Parking in	formati	on (i.e.	if locate	ed in a city)	?	
Cross Street(s):								
The Eagle Scout "Good Citizens Scout by the Marine Corps Leag	•					esented to t	he Eagle	
This application will be forward	rded to the local	Detachm	ent loc	ated cl	osest t	o the Cour	t of Honor.	
Mail to: Marine Robert Rossi 12605 Deoudes Road	Email to: robert.ros	ssi.usmc@	@gmail	.com				

(You will receive a confirmation email stating your application was received.)

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Boyds, MD 20841

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