



# BLUE STAR AWARD NOMINATION FORM

To: Council President or Congressmen (for counselors working in a council) \_\_\_\_\_ (date)  
or Corps office (for independent counselors)

The \_\_\_\_\_ hereby nominates  
counselor \_\_\_\_\_ for the Blue Star Award.

1. Years of service: \_\_\_\_\_ When certified: \_\_\_\_\_

2. He has served his own Cadet club with dedication as follows:

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3. He has displayed concern and enthusiasm for the welfare of his council (unless an independent counselor) as follows:

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4. His outstanding achievements (guidelines) include the following:

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(over)



5. His achievements do not fall into the categories listed in the guidelines, but I (we) feel that his superior accomplishments in the following make him a notable nominee for the Blue Star Award.

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Signed: \_\_\_\_\_

Title: \_\_\_\_\_