



20 ___ Youth Ordeal Citation

Personal Information

NOTE: All blanks on this form must be filled in. PLEASE PRINT CLEARLY!

First, Middle, and Last Name plus Title if any			Nickname (e.g. Bob for Robert)		
Candidate E-Mail Address			BSA Person ID		
Mailing Address			Birth Date (MM/DD/YYYY) (Birth date is very important)		
City	State	Zip Code (5 or 9 digit)	Check District Name <input type="checkbox"/> Old Capitol Valley <input type="checkbox"/> Red Cedar <input type="checkbox"/> Three Rivers		
() _____ Home Phone Number	() _____ Cell Phone Number	_____ Troop Number			
Parent's Name		() _____ Home Phone Number	() _____ Cell Phone Number		
Parent E-Mail Address					

Election & Callout Information

_____/_____/_____ Election Date	_____ Election Location				
_____/_____/_____ Callout Date	_____ Callout Location				
Signature of Election Team Member			Signature of Election Team Member		
Signature of Election Team Member			Signature of Election Team Member		
Unit Leader Certification	I do hereby attest that the above named youth is age 20 or younger and meets all the criteria for membership in the Order of the Arrow.				
Unit Leader Signature			_____/_____/_____ Date (mm/dd/yyyy)		

For Lodge Use Only

Election	_____ Received by Unit Elections	_____/_____/_____ Date (mm/dd/yyyy)	_____ Received by OAC	_____/_____/_____ Date (mm/dd/yyyy)
Call Out	_____ Citation Verified	_____/_____/_____ Date (mm/dd/yyyy)	_____ Sec Entered in DB	_____/_____/_____ Date (mm/dd/yyyy)
Inductions	_____ Received by Lodge Inductions	_____/_____/_____ Date (mm/dd/yyyy)	_____ Conclave Letter Sent	_____/_____/_____ Date (mm/dd/yyyy)