FOR CHAPTER SECRETARY Date Silver Arrowhead Presented: Fee Paid (Cost is \$2.50): Recipient's Name: Chapter: _ Unit #: _

SHAWNEE LODGE **ORDER OF THE ARROW**

BEYOND BROTHERHOOD



NAME		
ADDRESS		
CITY		
STATE		
CHAPTER (DISTRICT)		
UNIT NO	AGE	
SILVER ARROWHEAD AWARD		

TO BE ELIGIBLE FOR THE SILVER ARROWHEAD AWARD A SCOUT OR SCOUTER MUST:

		Signature
1.	Be currently registered in Scouting and the O.A.:	-
	(Expiration date on membership card) and the Order of the Arrow.	
2.	Brotherhood member no less than six months	
۷.	Date Brotherhood conferred	
3.	Active in unit for at least six months after	
	Brotherhood confirmed (must be signed by unit	
	leader)	
4.	Must have attended one lodge or chapter function	
	within the last six months (excluding the event where	
	Brotherhood was earned).	
5.	Have completed six days and nights of LONG TERM	
	CAMP since earning Brotherhood.	
	DATE OF CAMP	
	CAMP ATTENDED	
6.	Must have participated in camp promotion since	
	attending Brotherhood.	
7.	Attend one of the following:	
	Serving Project	
	National Leadership Seminar	
	National O.A. Conference	
	Sectional Conclave	
Item	s above are to be signed by the chapter chief unless speci	fied.
APF	PLICANT'S CERTIFICATION:	
I cer	tify that I have maintained my Lodge and Scout registrat	ion, continued my interest in Scouting and camping,
and	have continued to serve others cheerfully. I have attende	d Order of the Arrow functions so far as I am able, and
now	wish to apply the Silver Arrowhead Award.	
DAT	TE:SIGNED:	
UNI	T LEADER'S CERTIFICATION:	
I cer	tify that the above candidate has completed the camping	requirements since attaining the Brotherhood and has
	l in accordance with the Scout Oath and Law, and the pri	
chee	orfulness in service to others.	-
DAT	ΓΕ: UNIT LEADER'S SIGNATUI	RE: