Venturing Silver Award Progress Record and Application Please print or type all information. Give month, day, and year for all dates.

Part I-	-Persona	al Data:				
Name			Nickname			
			State Zip			
			Birthday			
			Grade or year in college			
Church	or relig	gious affiliati	on			
Date e	ntered \	Venturing _				
(Requir 1. Ven	ements turing E	Bronze Awar	no particular order) ds (Earn at least one.): Sports			
mm	/dd/yy	Advisor approval	Religious Life			
mm	ı/dd/yy	Advisor approval				
mm	ı/dd/yy	Advisor approval	Arts and Hobbies			
	/dd/vv	Advisor approval	Sea Scout (Half of Quartermaster)			
mm	ı/dd/yy	Advisor approval Gold Award:	Outdoor (Half of Ranger)			
	mm/dd/yy Advisor approval . Emergency Preparedness:					
mm	ı/dd/yy	Advisor approval	A—Completed Standard First Aid or equivalent course			
mm	ı/dd/yy	Advisor approval	B—Completed CPR certification			
mm	ı/dd/yy	Advisor approval	C—Completed the BSA Safe Swim Defense training course			
mm	ı/dd/yy	Advisor approval	D—Led or participated in a group swim using the BSA Safe Swim Defense			
4. Leadership:						
mm	n/dd/yy	Advisor approval	A—Completed the Venturing Leadership Skills Course			

SILVER

	mm/dd/yy	Advisor approval	B—Served for at least six or appointed crew, district position			
5.	Ethics in Action:					
	mm/dd/yy	Advisor approval	A—Participated in at least Controversies	two Ethical		
	mm/dd/yy	Advisor approval	B—Organized and led or lead an Ethics Forum	helped organize and		
6.	Silver Awa	rd Review:				
	mm/dd/yy	Advisor approval				
— Pa	rt III—Perso	nal Certificat	tion of Silver Award Candid	ate:		
tic du	on for the a ct in keepir	ward. I subsci ng with the p	the activities and projects of the to the Venturing Oath principles of the Boy Scouts core my 21st birthday.	and consider my con-		
Can	didate's signature	-1-1-5				
Cr	ew No	Cha	artered organization:			
Pa	rt IV—Endo	orsement of C	Crew Advisor/Crew Committ	ee Chairman:		
he of	/she has to the award,	our satisfaction	ate is well qualified for the on fulfilled the requirement she has our complete recom nievement.	s for the many facets		
Ac	lvisor			Date		
Cr	ew commit	tee chairman		Date		
— Pa	rt V—Coun	cil Certificatio	on/Recognition:			
Со	uncil	Name	Region	Area		
ple	eted the red	ard candidat	e is a currently registered Nor the Silver Award, he/she perseverance required to acilver Award is authorized.	enturer. Having comis to be congratulated		
Sco	out executi	ve		Date		
Pa	rt VI—Prese	entation:				
Th	e Silver Aw	ard was pres	ented to			
				Name		
on	Date	_ in ceremor	nies at	tion		