

International Catholic Awareness Award Application

(Please Print) Scout Unit #: _____ Parish: _____

Candidate's Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Email: _____

Home Phone: () _____ - _____ Work Phone: () _____ - _____

School Name: _____ Grade: _____ Age: _____

(Please Print) **Scout Leader Information (if in a scout unit)**

Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Email: _____

Home Phone: () _____ - _____ Work Phone: () _____ - _____

Program Completed

Please indicate the program that you just completed. Youth in grades 3 - 5 should work on the Lapel Pin Program. Youth between 11 - 18 years old should work on the Medallion program. Adults can earn the Medallion award by assisting youth with either program.

Lapel Pin Program Youth Medallion Program Adult Medallion Program

Candidate's Certification

I have completed requirements #1 and #2, option # _____ and # _____.

Scouts signature: _____ Date: ___ / ___ / ___

Parent's / Scout Leader's Certification

I hereby certify that the above named Scout has successfully completed the work required for the Rosary Patch.

Signature: _____ Date: ___ / ___ / ___

Return this application along with the application fee payable to KDCCS to:

ICCS Activity
Attn: George C. LeCrone, Sr.
10700 Leeward Lane
Knoxville, Tn. 37934-3012