

# Conservation Good Turn CERTIFICATE application

(Submit application to Ross Arnold at [Rossarnold1213@gmail.com](mailto:Rossarnold1213@gmail.com) )

Person submitting the application

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Name

Email Address

Phone No.

Unit type and no. \_\_\_\_\_ Date Submitted \_\_\_\_\_

(pack, troop, team, crew)

Participating agency/organization \_\_\_\_\_

Type of project \_\_\_\_\_

Number of workers youth \_\_\_\_\_ adult \_\_\_\_\_ Total hours worked \_\_\_\_\_

Please provide a brief summary of the project(s) including what the unit members learned from their experience.

Unit leader's name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip code \_\_\_\_\_

Phone No. \_\_\_\_\_ Email Address: \_\_\_\_\_

**For council use:**

Certificate prepared on: \_\_\_\_\_

Certificate sent to unit leader on: \_\_\_\_\_

Project information recorded \_\_\_\_\_