

Unit Election Report

Unit elections need to be completed by March 31st. Please submit the unit election form by the following Friday in April by mailing to the Sioux Council, 800 N. West Ave., Sioux Falls, SD 57104-5720, or by fax 605.361.2697, or email Sioux.Council@Scouting.org.

Council name Sioux Lodge name Tetonwana #105
 Unit type & no. _____ Date of election _____
 No. of registered active youth _____ No. of youth present _____

NOTE: At least half of the registered active unit members must be present to hold an election.

(Fill in names and ranks of eligible youths before election.)

Name	Rank/Award	Check if Elected	Name	Rank/Award	Check if Elected
		☐			☐
		☐			☐
		☐			☐
		☐			☐
		☐			☐
		☐			☐
		☐			☐
		☐			☐
		☐			☐
		☐			☐

I certify that the above youth members are eligible and approve them as nominees for election. I also understand that the election results will be final for the year.

 Unit leader's signature

Number of members eligible _____ Number of ballots turned in _____
 Number of votes required to be elected _____ Number elected _____

Print Election Team Members Names

Election team members' signatures:

List names, mail and email addresses, and phone and BSA ID numbers of those elected on the back of this form. Write clearly!

Elected Scouts Information Only

Unit: _____

Election Date: _____

Name: _____

Name: _____

Address: _____

Address: _____

City: _____ State: _____ Zip: _____

City: _____ State: _____ Zip: _____

Phone: _____

Phone: _____

Birthdate: ____/____/____

Birthdate: ____/____/____

Email: _____

Email: _____

BSA ID # _____
(If known)

BSA ID # _____
(If known)

Name: _____

Name: _____

Address: _____

Address: _____

City: _____ State: _____ Zip: _____

City: _____ State: _____ Zip: _____

Phone: _____

Phone: _____

Birthdate: ____/____/____

Birthdate: ____/____/____

Email: _____

Email: _____

BSA ID # _____
(If known)

BSA ID # _____
(If known)

Name: _____

Name: _____

Address: _____

Address: _____

City: _____ State: _____ Zip: _____

City: _____ State: _____ Zip: _____

Phone: _____

Phone: _____

Birthdate: ____/____/____

Birthdate: ____/____/____

Email: _____

Email: _____

BSA ID # _____
(If known)

BSA ID # _____
(If known)

Name: _____

Name: _____

Address: _____

Address: _____

City: _____ State: _____ Zip: _____

City: _____ State: _____ Zip: _____

Phone: _____

Phone: _____

Birthdate: ____/____/____

Birthdate: ____/____/____

Email: _____

Email: _____

BSA ID # _____
(If known)

BSA ID # _____
(If known)

Name: _____

Name: _____

Address: _____

Address: _____

City: _____ State: _____ Zip: _____

City: _____ State: _____ Zip: _____

Phone: _____

Phone: _____

Birthdate: ____/____/____

Birthdate: ____/____/____

Email: _____

Email: _____

BSA ID # _____
(If known)

BSA ID # _____
(If known)