## YOLO DISTRICT AWARDS NOMINATION FORM CUBMASTER OF THE YEAR

Name of Nominee		Unit	
Tenure in position: Sta	art Date	End Date	Duration
What training has the no	ominee received?		
What training has the no	ominee given to others?		
Other community activit	ties in which nominee p	participates, particularl	y service to youth:
you like to see this person	n recognized? What have	been the nominee's gr	sures of the unit's strength. Why would eatest contributions to your unit? Give eing Cubmaster of the Year?