District Committee Key Progress Record and Application



Candidate's Personal Information

Name	e:			
Addre	ess:			
City St	tate Zip			
Email:	:			
Distric	ct:			
Counc	cil Name:			
as the to ear	n a five-year period, complete at least three chair of the district or chair of one of the the District Committee Training Award.	e district operat . Please include	ing committees. This ca Month and Year.	an include the tenure used
From _	to	From	to	
From _	to			
Dorfo	Complete District Committee Position least one additional supplemental or a			
		a a ward		
DO tile	e following during the tenure used for this Serve in a district that achieves primar years.		ed performance objectiv	es for at least two of the
	Take part actively in at least twelve district committee meetings.			
	Give primary leadership in meeting an	assigned distric	t objective/goal in each	year.
Distri	ict/Council Training Committee	Action		
The ap	oplicant has met all the requirements for t	the District Com	mittee Key.	
Approv	ved by:			
District o	or Council Training Committee Chair Date			
Ne	ext steps:			



☐ Return a copy of this approved document to the district/council advancement

