Order of the Arrow Unit Election Report

Unit Type and Number: ___________________________ District: ___________________________
Unit Leader Name: ___________________________ Phone: ___________________________
Number of active, registered youth in unit: _______ Date of Election: ___________________________

Instructions for the Unit Leader: At least half of the registered, active (as defined by the unit leader) youth members in a unit must be present in order to hold an election. Please completely fill out all sections above the dotted line (unless otherwise stated) prior to the election. This will help speed up and smoothen the overall election process. It is preferred that you type your responses if you received this form digitally. Hand a printed copy of this sheet to the OA representatives when they arrive. Thank you for your support.

Youth Eligible for Election

For OA use only

1. Name: ___________________________ Rank: __________________________
   Phone Number: ___________________________ Email Address: ___________________________

2. Name: ___________________________ Rank: __________________________
   Phone Number: ___________________________ Email Address: ___________________________

3. Name: ___________________________ Rank: __________________________
   Phone Number: ___________________________ Email Address: ___________________________

4. Name: ___________________________ Rank: __________________________
   Phone Number: ___________________________ Email Address: ___________________________

5. Name: ___________________________ Rank: __________________________
   Phone Number: ___________________________ Email Address: ___________________________

6. Name: ___________________________ Rank: __________________________
   Phone Number: ___________________________ Email Address: ___________________________

(Please use additional forms if necessary)

Certification of Eligibility

I am familiar with the membership requirements of the Order of the Arrow and hereby certify that the above youth have met those requirements, and I approve them as nominees for election. I understand that this is the only Order of the Arrow election that may be conducted for this unit this year, and that the results, once certified, are final.

Unit Leader Signature: ____________________________________________ Date: ___________________________

Election Results (OA use only)

CHAPTER: ___________________________ Executive Vice-Chief: ___________________________
Number of registered, active youth in unit: _______ Number of registered, active youth present: _______
Number of votes needed for election (50%): _______ Number of youth elected (fill in check boxes): _______

Certification of Election

Election Team Leader Signature: ___________________________ Election Team Member Signature: ___________________________
Election Team Member Signature: ___________________________ Election Team Member Signature: ___________________________
Election Team Member Signature: ___________________________ Election Team Member Signature: ___________________________