

2005-2007 "Into Your Hands..." Ohio State Program Report

YOUTH ACTIVITIES PROGRAM

Reports Must Be Postmarked No Later Than The First Day Of The Next Reporting Period Except April; September 1, November 1, January 1, March 1 And April 15. Please Note: Reports Received After April 20 Will Not Qualify For Program Points.	Council # _____	<input type="checkbox"/> Jul-Aug <input type="checkbox"/> Sep-Oct <input type="checkbox"/> Nov-Dec <input type="checkbox"/> Jan-Feb <input type="checkbox"/> Mar-Apr
"Councils Must Report 6 Activities To Max The Program And Receive 150 Points"	Division 1 2 3 4 5	

Report On Both "Mandatory" Activities Below For 50 pts	Activity Date	Pts	Award
Activity #45: Free Throw Competition Schedule and complete your council competition during January; date _____ Attach participation report #FT-1 with this form.		25	
Activity #46: Youth Of The Year Submit council nomination to state director by April 1 with this form.		25	

Report On A Minimum Of 3 Out Of The 7 Activities Below For 75 pts	Activity Date	Pts	Award
Activity #47: Youth Holiday Party		25	
Activity #48: Sponsor/Support A Youth Group Or Team		25	
Activity #49: Drug And Alcohol Abuse Program		25	
Activity #50: Scholarship Program		25	
Activity #51: Youth Clean Up Day		25	
Activity #52: Outing To Learn About Vocations		25	
Activity #53: Council Choice		25	

Report On 1 Out Of The 2 Activities Below For 25 pts	Activity Date	Pts	Award
Activity #54: Start Or Reactivate A Squires Circle		25	
Activity #55: Joint Circle/Council Event Or Squires Support		25	

Description Of Activity (Number of council members/families participating, Total participants, Details and success of activity)

Director's Comments: _____ _____	Mail White & Yellow Copies To: Michael F. Abfall State Youth Director 34175 Detroit Road Avon, Ohio 44011 440-937-5338 spike13975@yahoo.com Retain Pink Copy For Council Files.
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Attach Additional And Supporting Documentation To Qualify For The State And Divisional Best Activity Awards

Submitted By: _____ Tel: _____ Date: _____