To complete this form online, please download and save a blank copy to your computer. Open the saved copy and fill in each blank. Save again. This will be the copy you send with your application.



NGC Award Application Cover Sheet

(optional)		State Award Name(optional)			
		NGC Award Name			
	lub/Individual App	olying for Award			
If club, nu	mber of members	Award Size Group	s	M _	L
If state, n	umber of clubs	Award Size Group	s _	M _	L
Contact Name					
	Phone				
-	City	State	Zip		
Region		State			
State Awards Cha	irman				
Email	Phone				
Address ₋					
_	City	State	Zip		
Is this project	New ORC	Continuing from previous work?			
Beginning date	E:	xpected completion date		_ OR	Ongoing

ATTACH completed application. Unless noted in specific award description, all applications are limited to 3, single-sided pages. (Plus, this cover sheet.) No report covers, notebooks, etc. allowed. Follow descriptors on Scoring Sheet to prepare an accurate, complete report.

All applications are to be **submitted electronically** unless otherwise noted in award description. **Send to your State Awards Chairman by the requested due date.** Only awards submitted through State Chairmen will be accepted.