



FLATIRONS YOUNG MARINES

"Strengthening the lives of America's youth"



ACTIVITY/AWARD/RIBBON VERIFICATION FORM

Young Marine: _____
(Please Print Clearly Rank / Name)

Activity/Award/Ribbon: _____

Please explain how you have fulfilled the requirements for the activity/award/ribbon. If supporting documents is required, pleas attach to this form.

I hereby verify that I have completed all necessary requirements as noted above.

Signature of Young Marine Date

Approved:

Adult Leader (if appropriate) Date

Commanding Officer Date

Submit this form to Adjutant

Noted in YMRB

YMRB DB ___ NAT DB ___

Certified Awarded _____

Ribbon Awarded _____