

NATIONAL AWARD NOMINATION FORM

Include four letters of endorsement with this application.
Letters must include specific ways nominee has served beyond position expectations.

Name _____

Address _____ City _____ Zip _____

Current position(s) _____

Number of years in Girl Scouting _____ (for information only) Service unit (if applicable) _____

Previous awards earned (please include dates) by nominee:

Outstanding Leader _____ Green Angel _____ Honor Pin _____

Outstanding Volunteer _____ Appreciation Pin _____ Thanks Badge _____

Thanks Badge II _____

Previous position(s) held by nominee:

NOTE: The Council Awards Task Group will determine the appropriate national award based on the following information and 4 accompanying letters of endorsement.

Please give a detailed description of how nominee has delivered service beyond expectation of the position held highlighting their involvement, impact, and results at the:

Troop level:

Service unit level:

County level:

Council level:

National level:

Community level and other background:

Please list names and positions of individuals submitting letters of endorsement:

Name _____ Position(s) _____
Name _____ Position(s) _____
Name _____ Position(s) _____
Name _____ Position(s) _____

Information of person submitting nomination:

Name _____ Relevant position _____
Address _____ City _____ Zip _____
Phones -- Home _____ Work _____
Email _____

Signature of individual submitting nomination _____

Signature of Award Coordinator (if different than above) _____

Must submit to the council headquarters by October 30 to be considered. Include all endorsement letters.

Girl Scouts of Gulfcoast Florida, Inc. • Attn: Council Awards Task Group • 4780 Cattlemen Rd., Sarasota, FL 34233

TASK GROUP RECOMMENDATION

BOARD OF DIRECTORS

Recommended to receive

Date approved:

_____ award _____

Not recommended, or other suggestion

Comments:

Date _____

Signatures:

Council Awards Task Group Chair

Council President or CEO

Staff Advisor