

NOMINATION for COUNCIL PLAQUE AWARD



Description: Recognizes ten or more years of outstanding service to Girl Scouts.

Criteria:

1. May be any registered adult member of Girl Scouts (volunteer or staff), business, corporation, organization, or non-registered adult friend of Girl Scouting.
2. Must have performed 10 or more years of superior service to Girl Scouts.

Letters of support (Form 4065) are needed from three additional individuals,

Nominee contact information:		
Name:	Title/Position/Business Name:	
Address:		
City:	State:	Zip:
Name and complete address of person recommending the award:		
Name:	E-mail:	
Address:		
City:	State:	Zip:
Day phone number: - -	Evening phone number: - -	
How do you know the nominee?		
Nominee information:		
A. Nominee is: <input type="checkbox"/> A non-registered individual or group <input type="checkbox"/> A registered Girl Scout until (date): ____/____/____ or is a lifetime member: <input type="checkbox"/>		
If a registered Girl Scout, list primary position:		
Additional <u>current</u> Girl Scout positions:		
B. What has the nominee done that could be described as above and beyond the expectations of the position?		

Length of service:		
How have these actions benefited the Girl Scout movement?		
Describe how the nominee's service has been outstanding. Name a specific example.		
Letters of support are needed from three additional individuals who are familiar with the service performed. Please use form #4065 (Letter of Support). When completed, attach them to this nomination. List below the names of persons asked to provide letters of support:		
Name:	Position:	Region:
Name:	Position:	Region:
Name:	Position:	Region:
Name:	Position:	Region:
Signature of nominator:		Date submitted:

E-mail to adultrecognitions@gsvsc.org

Deadline is October 31. This award requires Board approval.

For Office Use Only

Recognition Committee decision: <input type="checkbox"/> Approved <input type="checkbox"/> Denied <input type="checkbox"/> Pending, more information required
Date of Recognition Committee meeting:
If pending, please describe the information required:
Council Board approval: <input type="checkbox"/> Approved <input type="checkbox"/> Denied <input type="checkbox"/> Pending, more information required
Date of Board meeting:
If pending, please describe the information required: