

**GSUSA Adult Awards**

**Nomination for Thanks Badge**

**Description**

The Thanks Badge honors an individual whose ongoing commitment, leadership, and service have had an exceptional, measurable impact on meeting the mission-delivery goals and priorities of the entire council or the entire Girl Scout Movement.

**Criteria**

* The candidate is an active, registered adult Girl Scout.
* The outstanding service performed by the candidate resulted in outcomes that benefit the total council or the entire Girl Scout organization, and is so significantly above and beyond the call of duty that no other award would be appropriate.

Letters of support (Form 4065) are needed from four additional individuals from three or more regions (NE/NW/SE/SW) of the council.

|  |
| --- |
| Name of person completing nomination form:       |
| Street:       |
| City:       | State:       | Zip:       |
| Email:       | Phone:       |
| Best time and method to contact you:       |

|  |
| --- |
| Name of nominee:       |
|  | Street:       |
|  | City:       | State:       | Zip:       |
|  | E-mail:        | Phone:       |
| Is the nominee a member of Girl Scouts?  |
|  | [ ]  Yes [ ]  No [ ]  Not sure |
| Current position(s) held by nominee: |
|  |       |
| Please list the names and contact information for individuals submitting letters of endorsement (minimum of four letters from three or more regions of the council): |
| Name:       | Email:       |
| Region:       | Phone:       |
|  |
| Name:       | Email:       |
| Region:       | Phone:       |
|  |
| Name:       | Email:       |
| Region:       | Phone:       |
|  |
| Name:       | Email:       |
| Region:       | Phone:       |
|  |
| Please describe how the nominee has delivered outstanding service that has benefitted the council and/or the Girl Scout Movement overall. Describe a **specific** impact the nominee has made through this service. Attach additional pages, if necessary. |
|       |

|  |  |
| --- | --- |
| Signature of person submitting nomination:       | Date:       |

E-mail to: adultrecognitions@gsvsc.org

**Deadline is October 31. This award requires Board approval.**

***For Office Use Only***

|  |
| --- |
| Recognition Committee decision:[ ]  Approved [ ]  Denied [ ]  Pending [ ]  Date of meeting:  |
| If pending, please describe the information required:      |

|  |
| --- |
| Council Board approval:[ ]  Approved [ ]  Denied [ ]  Pending [ ]  Date of meeting:  |
| If pending, please describe the information required:       |