

NOMINATION for EMERGENCY PREPAREDNESS AWARD

Description: Honors girls and adults who exhibit concern for others' safety in an extreme crisis situation.

Criteria:

1. Registered girl or adult member of Girl Scouts
2. Actions performed were beyond age, maturity and training of nominee and saved or attempted to save the life of a person.

Nominations can be submitted throughout the year, but **must** be within 60 days of the emergency event.

Nominee contact information:				
Name:		Title/Position:		
Street:				
City:		State:	Zip:	
Age Level: <input type="checkbox"/> Daisy; <input type="checkbox"/> Brownie; <input type="checkbox"/> Junior; <input type="checkbox"/> Cadette; <input type="checkbox"/> Senior; <input type="checkbox"/> Ambassador; <input type="checkbox"/> Adult				
Service Unit:				
Name and complete address of person recommending the award:				
Name:		Title/Position:		
Street:		E-mail:		
City:		State:	Zip:	
Home Telephone:		Work/Cell Telephone:		
NOMINEE INFORMATION				
Date of Birth:		Height:		Weight:
Date of Incident:			Time of Incident:	
Check all that apply:				
<input type="checkbox"/>	animal bite	<input type="checkbox"/>	auto accident	
<input type="checkbox"/>	bicycle accident	<input type="checkbox"/>	cave-in	
<input type="checkbox"/>	drowning (water/ice)	<input type="checkbox"/>	electric accident	
<input type="checkbox"/>	fall	<input type="checkbox"/>	fire	
<input type="checkbox"/>	flood	<input type="checkbox"/>	hemorrhage	
<input type="checkbox"/>	poisoning	<input type="checkbox"/>	respiratory failure	
<input type="checkbox"/>	tornado	<input type="checkbox"/>	shock	
		<input type="checkbox"/>	other: _____	
Name of person in crisis:				
Street:				
City:		State:	Zip:	
Sex:	Age:	Approx. Height:	Approx Weight:	Relationship to Nominee, if any:
Signature of Nominee:				

Email to: adultrecognitions@gsvsc.org

DATA REQUIRED REGARDING ALL ACTS OF HEROISM

I.	Diagram of place where rescue occurred — (Please submit on separate sheet)
II.	Description of place where rescue occurred and its surroundings, insofar as it contributes to an understanding of circumstances surrounding the event.
III.	Description of exact nature of risk run, and extent of good judgment shown by rescuer in performing the rescue:
IV.	Physical effect of rescue upon the rescuer; if injured, the extent of the injuries:
V.	Description of weather conditions insofar as it contributes to an understanding of circumstances surrounding the rescue:

ADDITIONAL INFORMATION REQUIRED ACCORDING TO THE TYPE OF RESCUE

I. Aquatic Rescue/Ice Rescue	
Swimming ability of rescuer: <input type="checkbox"/> Good <input type="checkbox"/> Fair <input type="checkbox"/> Poor	
Does the rescuer hold a swimming badge or Red Cross Certificate: <input type="checkbox"/> Yes <input type="checkbox"/> No	
If yes, indicate type of badge or certificate:	
Swimming ability of the rescued: <input type="checkbox"/> Good <input type="checkbox"/> Fair <input type="checkbox"/> Poor	
Clothing worn by rescuer during rescue:	
Clothing worn by rescued during rescue:	
When brought ashore, what was condition of rescued? <input type="checkbox"/> Unhurt <input type="checkbox"/> Injured <input type="checkbox"/> In shock <input type="checkbox"/> Unconscious <input type="checkbox"/> Dead	Did rescued survive? <input type="checkbox"/> Yes <input type="checkbox"/> No
Was artificial respiration given? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Name of person who gave artificial respiration:	
Type of body of water: <input type="checkbox"/> Lake <input type="checkbox"/> Pond <input type="checkbox"/> Stream <input type="checkbox"/> River <input type="checkbox"/> Sound <input type="checkbox"/> Bay <input type="checkbox"/> Ocean <input type="checkbox"/> Swimming Pool	
Composition of Bottom: <input type="checkbox"/> Sand <input type="checkbox"/> Mud <input type="checkbox"/> Rocks <input type="checkbox"/> Weeds <input type="checkbox"/> Cement	Type of water flow <input type="checkbox"/> Still <input type="checkbox"/> Running

Speed of current:	Depth of water where rescue was made:
Distance covered: To Rescued: ____ To Safety: ____	
Method of Rescue: <input type="checkbox"/> Buoy; <input type="checkbox"/> Line; <input type="checkbox"/> Pole; <input type="checkbox"/> Boat; <input type="checkbox"/> Swimming; <input type="checkbox"/> Other: _____	
If swimming rescue, was any equipment available which was not used? <input type="checkbox"/> Yes; <input type="checkbox"/> No If yes, indicate equipment:	
Did rescuer dive to make rescue? <input type="checkbox"/> Yes; <input type="checkbox"/> No	
Was rescue squad or doctor summoned? <input type="checkbox"/> Yes; <input type="checkbox"/> No	Time summoned?
Time arrived?	Was treatment given? <input type="checkbox"/> Yes; <input type="checkbox"/> No
Name of Doctor:	
Address (street, city, state, zip code):	
II. Ice Rescue	
Did ice break under the rescuer? <input type="checkbox"/> Yes; <input type="checkbox"/> No	Did rescuer fall into water? <input type="checkbox"/> Yes; <input type="checkbox"/> No
If rescuer fell into water, how did they get out?	
Method used by rescuer to move over ice:	
Equipment used in rescue: <input type="checkbox"/> Board; <input type="checkbox"/> Ladder; <input type="checkbox"/> Rope; <input type="checkbox"/> Other – specify: _____	
III. Fire Rescue	
How was rescued taken to safety?	
How near the flames did the rescuer pass?	
What was the denseness of smoke through which the rescuer passed?	
Was the fire in a room? <input type="checkbox"/> Yes; <input type="checkbox"/> No	
If the fire was in a room, what was the rescuer's knowledge of interior arrangement?	
Outer clothing worn by rescuer:	
Outer clothing worn by rescued:	
Aid received by rescuer, if any:	
For Aquatic/Ice Rescue, include a diagram of the following: <ol style="list-style-type: none"> 1. Thickness of ice near point of rescue 2. Distance from place accident occurred to safety 3. Distance covered by rescuer to point of rescue 4. Location of boards, ladders, or ropes, if any were at hand 	

For Fire Rescue, include a diagram of the following:

1. Dimensions of the room or rooms through which the rescuer passed in performing the rescue
2. Location of doors, windows, stairs, elevators, and fire escape
3. Location of fire at the time of rescue
4. Location of the rescued when reached by the rescuer
5. Course followed by rescuer in the performance of the rescue
6. Distance from the place of rescue to safety

Diagrams for Aquatic/Ice/Fire Rescue



For Office Use Only

Recognition Committee decision:

Approved Denied Pending, more information required

Date of Recognition Committee meeting:

If pending, please describe the information required: