



# Application for GSUSA Outstanding Leader or GSUSA Outstanding Volunteer Award

20 Washington Avenue, North Haven, CT 06492  
(800) 922-2770 (in CT) • 203-239-2922 • 203-239-7220 (Fax) • [www.gsofct.org](http://www.gsofct.org)

All Girl Scouts of Connecticut Recognition Committee approved awards require **outstanding** service by a registered adult **above and beyond** the expectations of the position description, **significant** contributions to meeting Girl Scouts of Connecticut goals and service known to many people. Specific requirements and procedures for the Girl Scouts of Connecticut Recognition Committee and approved awards are available at [www.gsofct.org](http://www.gsofct.org). Please read them carefully before completing this nomination form. Your responses must be typed or written clearly and may be in a bulleted format. Submit this form for the **GSUSA Outstanding Leader Award** or **GSUSA Outstanding Volunteer Award**.

**The GSUSA Outstanding Leader and the GSUSA Outstanding Volunteer Awards will be retiring as of June 1, 2012.**

## Form of Recognition

- The GSUSA Outstanding Leader and GSUSA Outstanding Volunteer Award is a pin presented at the local Service Unit level at any Service Unit meeting or event.

## Criteria:

- Nominee must be a registered adult member of Girl Scouts and support the Girl Scout Mission.
- Nominee's work merits the recognition.

## Nomination:

- This nomination may be submitted by any group or individual familiar with the nominee's performance.

## Endorsements:

- The GSUSA Outstanding Leader and GSUSA Outstanding Volunteer Awards require that **two (2) endorsements** accompany each application form. This application form **does not** serve as an endorsement. Please send no more than two (2) endorsements. The Adult Recognitions Letter of Endorsement form may be found on [www.gsofct.org](http://www.gsofct.org) in the Forms Library.

## Submission/Approval:

- Please submit completed application form along with two letters of endorsement **by April 1, 2012** via mail, fax or email to your local Service Unit Recognitions Chairperson or designee for approval and signature. The Service Unit will keep the application and Letters of Endorsement for their records.
- Once application is approved and signed, the local Service Unit Recognitions Chairperson or designee forwards a copy of the completed Service Unit Recognition Committee Report to the Membership and Marketing Manager for final verification and signature.
- Membership and Marketing Manager forwards a signed copy of the Service Unit Recognition Committee Report back to the local Service Unit Recognitions Chairperson or designee.

## Award Purchase:

- The local Service Unit Recognitions Chairperson or designee presents a copy of the completed Service Unit Recognition Committee Report form to their local Girl Scout council retail shop for pin purchase

**Deadline:** *The local Service Unit Recognitions Chairperson or designee must receive this application form along with two (2) Letters of Endorsement no later than **April 1, 2012***

***If a volunteer has previously received either of the recognitions listed below, this nomination should only reflect service from that time on.***

Please check one:  GSUSA Outstanding Leader (2 endorsements)       GSUSA Outstanding Volunteer (2 endorsements)

## NOMINEE INFORMATION:

Nominee: \_\_\_\_\_ Troop #: \_\_\_\_\_ Service Unit: \_\_\_\_\_

Street: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Nominee's current position(s) in Girl Scouting: \_\_\_\_\_

How long has nominee been in this position? \_\_\_\_\_

ADULT RECOGNITIONS



# Application for GSUSA Outstanding Leader or GSUSA Outstanding Volunteer Award (cont.)

Nominee: \_\_\_\_\_ Award: \_\_\_\_\_

**SERVICE UNIT APPROVED AWARDS RECEIVED BY NOMINEE: (Please state year received)**

GSUSA Outstanding Leader Award _____	GSOFACT Leading the Way Pin _____
GSUSA Outstanding Volunteer Award _____	GSOFACT Helping Hand Pin _____
Other _____	Other _____

**GIRL SCOUTS OF CONNECTICUT BOARD APPROVED AWARDS RECEIVED BY NOMINEE: (Please state year received)**

GSUSA Appreciation Pin _____	GSUSA Thanks Badge II _____
GSUSA Honor Pin _____	GSOFACT Pin _____
GSUSA Thanks Badge _____	GSOFACT Light the Way Pin _____

**Complete for GSUSA Outstanding Leader Award Only:** Describe the nominee's service and give detailed descriptions of how the delivered service has been OUTSTANDING – ABOVE AND BEYOND the expectation of the position currently held. Be sure to include statistics.

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**Complete for GSUSA Outstanding Volunteer Award Only:** Nominee must be serving in a position other than Leader. Provide a detailed description of the exceptional service demonstrated by the nominee. Describe in detail the specific audience(s) benefiting from this person's service and the number of girls or adults being served.

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**NOMINATOR INFORMATION:**

Nominator: \_\_\_\_\_ Troop #: \_\_\_\_\_ Service Unit: \_\_\_\_\_

Street: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Current Position in Girl Scouting: \_\_\_\_\_

Nominator Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Date of Presentation (if known): \_\_\_\_\_

ADULT RECOGNITIONS



# Application for GSUSA Outstanding Leader or GSUSA Outstanding Volunteer Award (cont.)

Nominee: \_\_\_\_\_ Award: \_\_\_\_\_

**ENDORSEMENTS:** Two (2) Letters of Endorsement documenting the Nominee's service and its scope and impact must accompany this nomination.

**This nomination will not be processed without the required letters of endorsement.**

The following individuals will be submitting a letter of endorsement:

Name (#1): \_\_\_\_\_ Email \_\_\_\_\_

Name (#2): \_\_\_\_\_ Email \_\_\_\_\_

**PAST OR PRESENT POSITIONS HELD BY NOMINEE (check all that apply):**

- Troop/Group Leader
- Other Troop/Group Position \_\_\_\_\_
- Service Unit Manager
- Service Unit Team Member  
List Position(s) \_\_\_\_\_
- Delegate/Alternate Delegate
- Council Learning Facilitator
- Council Program Facilitator
- Council Program Chairperson
- Council Committee Member \_\_\_\_\_  
Name of Committee \_\_\_\_\_
- Board Member \_\_\_\_\_  
Position \_\_\_\_\_
- Camp Staff \_\_\_\_\_  
Position \_\_\_\_\_
- Summer Program Staff \_\_\_\_\_  
Position \_\_\_\_\_
- Other \_\_\_\_\_  
Position(s) \_\_\_\_\_

ADULT RECOGNITIONS

**Questions:** Please contact the Volunteer Services Department at [adultdev@gsofct.org](mailto:adultdev@gsofct.org) or 203-239-2922 ext 3347.

**Service Unit Use Only:**

Application received from nominee: Date: \_\_\_\_\_ By: \_\_\_\_\_

\_\_\_\_\_ Service Unit approves nomination

\_\_\_\_\_ Service Unit does not approve nomination (Reason) \_\_\_\_\_

Signature of Service Unit Recognition Chairperson/Designee: \_\_\_\_\_ Date: \_\_\_\_\_

Date Service Unit Recognition Committee Report sent to MMM: \_\_\_\_\_

Date Service Unit Recognition Committee Report received from MMM: \_\_\_\_\_