



Honor Pin nomination

Candidate information:

Name _____ Date _____

Address _____
City State Zip

Phone: (_____) _____ E-mail: _____

Service unit: _____ Position: _____

Nominator information:

Name _____ Date _____

Address _____
City State Zip

Phone: (_____) _____ E-mail: _____

Service unit: _____ Position: _____

1. Is the candidate a registered member of Girl Scouts?

Yes No Not sure

2. Please provide a detailed description of how the candidate's work performance exceeds the expectations of their position.

3. Provide details on a service/program provided by the candidate; describe the service/program delivery and how the program participants benefited from the experience.

(over)

4. How did the program/service further the council's overall mission and goals to serve all girls?
How did it increase diversity, membership, visibility and/or program participation?

5. If applicable, please provide statistical/measurable data of the service/program the candidate provided to support your nomination (example: % of increase in membership, participation, and/or inclusion).

6. Please provide any additional comments or relevant details to help describe why this candidate deserves to be awarded the Honor Pin.

If desired, you may attach additional pages to show "above and beyond" performance.

Service unit representative signature: _____

Date: _____

Application deadline: April 30 by 4:30 p.m.

Forms must be sent to: volunteer@sdgirlscouts.org