

## ADULT RECOGNITION APPLICATION FORM

### **BOARD** Approved Volunteer Recognition



Mail applications and endorsements to:  
Girl Scouts in the Heart of Pennsylvania  
ATTN: Volunteer Recognition Committee  
350 Hale Avenue,  
Harrisburg, PA 17104



#### Instructions:

- Use this form to nominate volunteers for the following Girl Scouts in the Heart of PA awards  
**Forever Green Award and Heart of PA Award**  
And the following GSUSA awards only:  
**Appreciation Pin, Honor Pin, Thanks Badge, and Thanks Badge II.**
- Type or write clearly.
- Circle proposed award – see criteria in handbook
- Completed nomination application and endorsements must be received by the Volunteer Recognitions Committee on or before **January 15**. Any forms arriving at a later date will be held for the following year.
- There is no charge for these awards.

#### SECTION 1: NOMINEE INFORMATION

Candidate's Name: (Last, First)	GSUSA Member ID #:(check with Associate, Membership Svcs.)
Mailing Address:	City, State, Zip:
Daytime Phone Number: (    )	Evening Phone Number: (    )
E-mail Address:	Service Unit:
Total # of Years as a Girl Member:	Total # of Years as an Adult Member:
Current Volunteer Position(s):	

#### SECTION 2: NOMINATOR INFORMATION

Name of individual requesting award:	
Mailing Address:	City, State, Zip:
Daytime Phone Number: (    )	Evening Phone Number: (    )
E-mail Address:	Service Unit:

#### SECTION 3: ENDORSEMENT INFORMATION

The criterion for board level approved awards requires outstanding service that goes beyond the responsibilities and expectations for the position(s) held by the nominee. Service should be measured by how the person has helped to carry out the Girl Scout Mission. Please describe in as much detail as possible why it is believed the service provided by this individual is outstanding and exceeds expectations for the position(s). In your endorsement, consider what the results of the service are, who benefited, and how many were served. An additional page may be attached if necessary.

*continued...*

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Indicate any positions that the nominee currently or previously held:

- |   |   |   |
|---|---|---|
| <input type="checkbox"/> Leader/Advisor                                     | <input type="checkbox"/> Asst. Leader/Advisor                       | <input type="checkbox"/> Group Leader (interest/short-term group) |
| <input type="checkbox"/> Service Unit Manager                               | <input type="checkbox"/> Service Unit Team Member                   | <input type="checkbox"/> Service Unit Product Sales Manager       |
| <input type="checkbox"/> Service Unit Event Coordinator                     | <input type="checkbox"/> Service Unit Volunteer Learning Consultant |   |
| <input type="checkbox"/> Adult Learning Facilitator                         | <input type="checkbox"/> Workshop Facilitator                       | <input type="checkbox"/> Volunteer Development Task Team Member   |
| <input type="checkbox"/> Day Camp Director                                  | <input type="checkbox"/> Day Camp Volunteer                         | <input type="checkbox"/> Camp Staff/Summer Program Staff          |
| <input type="checkbox"/> Council Program Volunteer                          | <input type="checkbox"/> Special Event Chairperson                  | <input type="checkbox"/> Special Event Committee Member           |
| <input type="checkbox"/> Board Member                                       | <input type="checkbox"/> Delegate                                   | <input type="checkbox"/> Employed Staff: Position _____           |
| <input type="checkbox"/> Council Committee Member: Name of Committee: _____ |   |   |
| <input type="checkbox"/> Other Positions (list): _____                      |   |   |

Please indicate nominee's other community service:

\_\_\_\_\_

Previous GSUSA Awards Received by Candidate:

AWARD	REC'D	YEAR (if known)	AWARD	REC'D	YEAR (if known)
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**GSUSA Service Unit Recognitions approved by Service Unit**

GSUSA Outstanding Leader \_\_\_\_\_ GSUSA Outstanding Volunteer \_\_\_\_\_

**GSUSA Progressive Volunteer Recognitions approved by Board of Directors**

GSUSA Progressive Volunteer Achievement Award Pin \_\_\_\_\_ GSUSA Keys (white - \_\_\_\_, black - \_\_\_\_, gold - \_\_\_\_, silver - \_\_\_\_, copper - \_\_\_\_) - circle keys received and enter year(s) received, if known

**GSHPA Council Recognitions approved by Board of Directors**

GSHPA Forever Green \_\_\_\_\_ GSHPA Heart of PA \_\_\_\_\_

**GSUSA Recognitions approved by Board of Directors**

GSUSA Appreciation Pin \_\_\_\_\_ GSUSA Honor Pin \_\_\_\_\_  
 GSUSA Thanks Badge \_\_\_\_\_ GSUSA Thanks Badge II \_\_\_\_\_

***Please include with application the number of endorsements as required (see below) for the award you are considering. It is never incorrect to send the maximum number of endorsements, so that your nominee may be considered for all recognitions. NOTE: Applications cannot be considered without receipt of all required endorsements.***

**ENDORSEMENT FORMS:** Please copy, complete and attach to this application as many needed, as per endorsement requirements.

NAME OF AWARD	NUMBER OF ENDORSEMENTS REQUIRED	LIST NAMES OF ENDORSERS
GSHPA Forever Green Award	3-page application plus a minimum of two (2) endorsements	1.
GSHPA Heart of PA Award	3-page application plus a minimum of three (3) endorsements	2.
GSUSA Appreciation Pin	3-page application plus a minimum of two (2) endorsements	3.
GSUSA Honor Pin	3-page application plus a minimum of three (3) endorsements	4.
GSUSA Thanks Badge	3-page application plus a minimum of four (4) endorsements	
GSUSA Thanks Badge II	3-page application plus a minimum of four (4) endorsements	

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Submitted in support of (nominee): \_\_\_\_\_

Application prepared by: \_\_\_\_\_

In what capacity are you familiar with the nominee's performance/contributions to Girl Scouting?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

In approximately 100 words or less, state your reasons for endorsing this nomination. Please include:

- How the nominee's performance has been outstanding (or beyond the expectations of the position),
- How the nominee's contributions have benefitted Girl Scouting, and
- Any other comments or information that might be helpful.

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

Position(s) Title: \_\_\_\_\_

**VOLUNTEER RECOGNITION COMMITTEE USE ONLY**

Application  Approved: Date \_\_\_\_\_ OR  Denied: Reason \_\_\_\_\_

Signature of Committee Representative: \_\_\_\_\_