



Application for Outstanding Volunteer Award

Please print or type

Name: _____
First Middle Last

Home address: _____
Street address

_____ City State Zip

Day phone: _____ Cell phone: _____

Email: _____

Registered with: Troop _____ Service Unit _____ Other (specify)

Please complete the following information:

- 1. Please list the educational sessions that the nominee has completed for her/his position(s).

- 2. Please describe in detail the nominee's performance level that exceeds the expectations of the position(s) as outlined in their position description and the service performed.

- 3. List the impact and results of this person's actions and the specific audience benefiting from the service.

Service Unit Manager approval: _____
Signature Date

Presentation to be made by: _____

Fee enclosed: _____

Send award to: _____

Mail to: Girl Scouts of the Chesapeake Bay
c/o Recognitions
501 S. College Ave.
Newark, DE 19713-1301

(Please allow 10 working days to process this application)

