

Girl Scouts of Tulip Trace Council, Inc.
5596 East State Road 46
P. O. Box 5485
Bloomington, Indiana 47407-5485
812-336-6804 or 800-467-6804

PRESIDENT'S AWARD APPLICATION

PRESIDENT'S AWARD: To recognize the efforts of a service team in moving its service unit toward the goals and objectives of the council.

Criteria for Selection

1. Team members are registered Girl Scout adult volunteers.
2. Each member of the service team has taken orientation and training appropriate for the position held.
3. Delivery of Girl Scout program is effective resulting in the retention of 75 percent or more of troop/group leadership.
4. Overall girl membership for the service unit has reached the membership goal agreed upon by the team and the Membership Services Manager assigned to the service unit.
5. Service team personnel reflect the diversity of the service unit.
6. The service team has evidence of maintaining contacts in the community (e.g. scheduled talks to civic groups, sponsorship agreements, community profile updates).
7. Reports required by the council have been submitted on time.
8. The service team maintains ongoing communication with each troop/group and acts as a liaison for girls registered individually in its service unit.
9. The service team has developed and implemented a plan to contact representatives of each troop or group that cannot attend the service unit meetings.
10. The team encourages adult participation in fund development and has increased annual giving support to the council.

Nomination and Approval Procedures

1. The members of the service team submit an application documenting and supporting the completion of criteria to the recognitions task group of the council. **Membership staff reviews application.**
2. The recognitions task group reviews the application and submits a written recommendation to approve or deny it, with rationale for this recommendation, to the council board of directors.
3. The council board of directors approves or rejects the application and so notifies the service team and the recognitions task group.

(over)

Please read the directions on the other side before completing this form.

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Service Unit _____ Service Unit Manager _____ Year _____

1. Orientation and training was taken by _____ members of the service team. (Attach list)
(number)

2. _____% of troop/group leaders retained.

3. Girl membership goal agreed upon by the team and the membership services manager of _____ members was met on _____.
(date)

4. Evidence of diversity on the service team: _____

5. Contacts were made to the following community groups:

<u>Group</u>	<u>Reason for contact</u>	<u>Person making contact</u>	<u>Date</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

6. The following reports were submitted on time: Date Submitted

Troop/Group Program/Financial Report	_____
Service Unit Events Planning and Report Forms	_____

7. Method by which service team maintained ongoing communications with each troop/group and acted as a liaison for girls registered individually:

8. Plan used to contact representatives of troops/groups not present at area meetings:

Documentation to attach to application:

1. Service unit goals
2. Service team members key to membership
3. Membership report of troops/groups
4. List of required trainings and dates service team members took those trainings