



# Application for Leadership Position

**Please type or print clearly**

Name of applicant: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_

City/Town: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone No.: \_\_\_\_\_ School Attending: \_\_\_\_\_ Grade: \_\_\_\_\_

Birth date: \_\_\_\_\_ Age: \_\_\_\_\_ E-mail: \_\_\_\_\_

Group/Troop#: \_\_\_\_\_ OR Individual Girl Member: Yes  No

Leader/Advisor's name: \_\_\_\_\_ Phone No.: \_\_\_\_\_

Address: \_\_\_\_\_

City/Town: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Service unit: \_\_\_\_\_

Number of years in Girl Scouting at each level:

Daisy \_\_\_\_\_ Brownie \_\_\_\_\_ Junior \_\_\_\_\_ Cadette \_\_\_\_\_ Senior \_\_\_\_\_ Ambassador \_\_\_\_\_

**Interest in Leadership Position**

I am applying to participate as: PA  LIT  SGSTA

Why do you want to be involved in this type of a leadership project?

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

**Experience in working with children in Girl Scouts:**

Position	Responsibility	Time Spent
_____	_____	_____
_____	_____	_____
_____	_____	_____

**Experience in working with children in other situations (such as church, babysitting, family)**

Position	Responsibility	Time Spent
_____	_____	_____
_____	_____	_____
_____	_____	_____

What did you enjoy most about these experiences?

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**Camping experience in Girl Scouting:**

Where did you camp?

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What kind of camp was it?

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Briefly describe your responsibilities/skills:

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When? How much time did you spend camping?

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**Camping experience outside of Girl Scouting:**

Where did you camp?

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What kind of camp was it?

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Briefly describe your responsibilities/skills:

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What did you enjoy most about camping?

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**Skills and Interests:**

Do you speak a language other than English? \_\_\_\_\_ If yes, what is it? \_\_\_\_\_

Do you know American sign language? \_\_\_\_\_ If yes, how long have you been doing it? \_\_\_\_\_

Do you have a current Red Cross First Aid Certificate? \_\_\_\_\_ If yes, indicate below:

Standard First Aid (Date of expiration: \_\_\_\_\_ )

CPR (Date of expiration: \_\_\_\_\_ )

Other certifications: \_\_\_\_\_

## Interest and Skill Assessment:

Place a number below by activity/interest areas that you:

(1) can teach; (2) are skilled at; (3) have done before; (4) would like to learn about.

If you have no interest, do not place a number by the topic.

_____ Arts	_____ Campfire program
_____ Clowning	_____ Crafts
_____ Dramatics	_____ Ecology
_____ Fire building	_____ First aid
_____ Flag ceremonies	_____ Games
_____ Girl Scouts Own	_____ Hiking
_____ Other ceremonies	_____ Maps and compass
_____ Knots	_____ Nature awareness
_____ Photography	_____ Puppetry
_____ Song leading	_____ Exercise, physical fitness
_____ Stargazing	_____ Story telling
_____ Water study	_____ Dance
_____ Orienteering	_____ Sports
_____ Outdoor cooking	_____ Canoeing
_____ Hikes	_____ Camping
_____ Badge/Try-It workshops	
_____ Other _____	
_____ Other _____	

## Placement information:

What level do you prefer to work with?  Daisy  Brownie  Junior

Is there a particular troop or group you want to work with? \_\_\_\_\_

If yes, which troop? \_\_\_\_\_ Leader \_\_\_\_\_ Phone \_\_\_\_\_

If you work with a troop:

Do you have a time preference for working with this troop? \_\_\_\_\_

If yes, what day(s) of the week? \_\_\_\_\_

What times? \_\_\_\_\_

Do you have a location/area preference? \_\_\_\_\_ If yes what is it? \_\_\_\_\_

Are there any times you cannot volunteer? \_\_\_\_\_

Reference information:

Please give the name and phone number of three persons who you will ask to provide a reference.

Name \_\_\_\_\_ Phone \_\_\_\_\_

Name \_\_\_\_\_ Phone \_\_\_\_\_

Name \_\_\_\_\_ Phone \_\_\_\_\_

**Note:** Applicants should submit a Reference Form for Leadership Position to the persons supplying references.

◆ Phone: (901) 767-1440 or 800-727-8104

◆ Web: [www.girlscoutshs.org](http://www.girlscoutshs.org)