

Adult Award Nomination Packet Thanks Badge, Thanks Badge II 2015

Submission Instructions

Complete all sections of this form and refer to the Submission Checklist to ensure all necessary information is included. Send the nomination packet, complete with all attachments, to:

Volunteer Services Specialist - Girl Scouts of the Colonial Coast - 912 Cedar Road - Chesapeake, VA 23322

Fax: 757-547-1872 - Email: volunteer@gsccc.org Nomination Deadline: November 30, 2014

	Nominatio	on is for recognition of service dur	ing the 2013-2014 N	/lembersh	ip Year (1	0/1/13 – 9/30/14)	
Nominator	Informa	ation					
Name				Service	e Unit		
Address							
Telephone	Home			Cell			
Email							
What is the	best way	to contact you?					
Candidate	Informa	ition					
Name				Service	e Unit		
Address							
Current Pos	ition(s) in	Girl Scouting					
		a registered Girl Scout adult.					
The nomine	e 📙 w	orks directly with girls 🔲 vol	unteers indirectly	, working	g with a	dults	
Choose one of the following criteria to determine the most appropriate award:							
☐ Thanks Badge – honors an individual whose ongoing commitment, leadership, and service have had an exceptional, measurable impact on meeting the mission-delivery goals and priorities of the entire council or the entire Girl Scout Movement.							
☐ Thanks Badge II – honors a previous Thanks Badge recipient who has continued to provide exemplary service in a leadership role, resulting in a measurable impact that benefits the entire Girl Scout Movement.							
Endorsem	ent Lett	ers					
Provide four endorsement letters in support of this nomination. Individuals or groups familiar with the service performed may submit letters of endorsement. (The person making this nomination <u>may not</u> submit a letter of endorsement.) Use the Adult Award Letter of Endorsement form for each letter.							

Provide the names and contact information of persons providing letters of endorsement for this nomination:

	Name	Phone	Email	Position in Girl Scouting
1.				
2.				
3.				
4.				

Qualification Statement

Please describe how the nominee has delivered outstanding service that has benefitted the Council and/or the Girl Scout Movement overall. Please describe a specific impact the nominee has made through this service. Attach additional pages, if necessary.

Supporting Documentation

Attach any additional documentation in support of this nomination. Supporting documentation may include program impact data, service delivery team/service unit goals or plan of work, Council goals, etc.

Submission Checklist									
 1. Nominator information complete and accurate 2. Candidate information complete and accurate 3. Candidate meets qualifications stated for appropriate award 4. Qualification statement is thorough, specific and detailed 5. Four letters of endorsement attached 6. Appropriate supporting documentation attached (optional) 7. Copies of this entire packet are made for the nominator's records 									
☐ I have reviewed this application and found it to be complete and accurate.									
Nominator Signature	Date								
For Use by Volunteer Services Department Received completed nomination form on (date) from Reviewed for thoroughness and accuracy Logged Communication sent regarding approval or denial to appropriate contacts. Date									
Recognitions Committee Decision									
☐ Approved ☐ Denied ☐ Pending, more information required									
If pending, please describe the information required:									
Signature of Committee Chair	Date								
Council Board Approval									
☐ Approved ☐ Denied ☐ Pending, more informa	tion required								
If pending, please describe the information required:									
Signature of Board Representative	Date								