

Girl Scouts, Tarheel Triad Council
8818 W. Market Street, Colfax, NC 27235

THE PRESIDENT'S AWARD APPLICATION FORM
Due by August 15th

Service Unit Mgr. Name _____ Service Unit# _____
Address: _____ City: _____ Zip: _____
Telephone: Day _____ Evening _____

Total Number of Troops in Service Unit: _____
Number of Each: _____ Daisy _____ Brownie _____ Junior _____ Cadette _____ Senior
Number of Individually Registered Girls _____

1. *Team members are registered adult Girl Scouts who have completed appropriate training, or demonstrated competence, or both, for the position held.*

A. The following Service Team positions are presently filled by registered adults:

Position	Name	
Service Unit Manager	_____	_____
Organizer (s)	_____	_____
Consultant (s)	_____	_____
Registrar	_____	_____
Cookie Manager	_____	_____
Other	_____	_____

B. Describe the training taken and/or the competence demonstrated by Service Team members.

2. *Delivery of Girl Scout program to the area is effective, resulting in the continuity of 75 percent of troops/groups.*

of Troops registered last year _____
of Troops registered this year _____

7. *The team maintains ongoing communications with each troop/group, individually registered girls, and leaders utilizing a variety of methods (meetings, mail, telephone) to serve the needs of the area.*

Describe ways the Service Team provides ongoing communication with all troops and with girls registered individually:

8. *The team encourages adult participation in fund development and has increased annual giving support to the council.*

How has the Service Team encouraged adult participation in fund development?

Additional information may be attached if necessary.

Signature of Service Unit Manager:

Date:
