

## Girl Scouts of Eastern South Carolina

## **Service Unit Approved Adult Recognitions Nomination Form:**

## **Volunteer of Excellence**

Directions:

Fill in all blanks. Be specific. Please type/print. The nominator should forward completed form and two letters of endorsement to the Service Unit Recognitions Committee.

Deadline for submission will vary by Service Unit but will be before the council deadline.

Note that all Service Unit level Recognitions have to be submitted by the Service Unit to Council no later than February 28, 2022.

I have carefully read the recognition criteria and feel the following person should be considered for:

□ Volunteer of Excellence \*\*

\*\* Attach 2 letters of endorsement to application (person submitting endorsement letter cannot fill out nomination form)

## Information on Nominee:

| Last Name                     | First Name   |         | Service Unit |  |
|-------------------------------|--------------|---------|--------------|--|
| Address                       |              | City    | Zip          |  |
| Email                         |              | Phone # |              |  |
| Present position in Girl Scot | uting        |         |              |  |
| Other/former Girl Scout pos   | itions held: |         |              |  |

If the nominee worked *directly* with Girls, please describe how she/he has delivered outstanding service to deliver the Girl Scout Leadership Experience through the National Program Portfolio.

If the nominee worked *indirectly* to support the Council's mission and goals, please describe the specific impact made in one or more of the following functional areas: Membership Development/Community Cultivation, Volunteer Relations and Support, Program, Leadership and Governance, Fund Development, and Council Support Service (such as IT, Customer Service, Merchandising, and MarComm). Attach additional pages, if necessary.

| 1. Description of service rendered | ed and who benefited:            |                                   |
|------------------------------------|----------------------------------|-----------------------------------|
|                                    |                                  |                                   |
|                                    |                                  |                                   |
|                                    |                                  |                                   |
|                                    |                                  |                                   |
| 2. Reasons this service was be     | yond expectations of position h  | eld:                              |
|                                    |                                  |                                   |
| _                                  | _                                |                                   |
| 2. Indicate how comics haloed      |                                  | it toward its mission and goals.  |
| Indicate how service helped        | move the council or Service Un   | iit toward its mission and goals: |
|                                    | _                                |                                   |
|                                    | _                                | ·                                 |
|                                    | _                                |                                   |
| Nominated by                       |                                  |                                   |
| Name (individual or group conta    | ct):                             |                                   |
| Address:                           |                                  |                                   |
| Telephone (home) :                 | ( work)                          | (e-mail)                          |
| Service Unit Name                  |                                  |                                   |
| Names of nominating individual     | s) or group supplying letters of | <b>5</b> (                        |
|                                    |                                  | Date                              |
| Thank you for your time and cor    | nsideration.                     |                                   |
| For Office Use Only                | _                                |                                   |
| The Service Unit Recogni           | tions Committee endorses this    | nomination                        |
| The Service Unit Recoani           | tions Committee denied this no   | omination                         |