

**Girl Scouts Heart of the Hudson, Inc.
NOMINATION FORM - OUTSTANDING LEADER**



Complete and return this form to your volunteer community chair or adult recognitions coordinator. Award will be given at the GS community level.

All information is required. This form must be accompanied by TWO letters of endorsement from troop members or their families

Recommended candidate _____

Address _____

City, Zip _____

Girl Scout community _____

Recommending group or individual _____

Address _____

City _____ Phone _____

Email _____

Candidate information: Troop # _____ Level _____

Length of time candidate has been an active Girl Scout member _____

Date and type of training (* required to be a leader)

*Basic Leader and Level Training _____

OR

*Leadership Essentials _____

Other training _____

Describe how the candidate's work with girls has exceeded the expectations as described on the leader position description:

TWO letters of endorsement are accompanying this nomination from:

Name _____

Address _____

City, Zip _____

Phone _____

Name _____

Address _____

City, Zip _____

Phone _____