



Please return Nomination Form to:
Girl Scouts of Greater New York
Volunteer Recognition Committee
40 Wall Street, Suite 708, New York, NY 10005

Nomination Form for Adult Recognition
(Not requiring Letters of Endorsement)
Due on or before November 15th

Please *type* or *print* all information.

Nomination for: (Please check only one)

GSGNY Outstanding Volunteer Skyline Outstanding Service Team Member
 Super Service Certificate Impact Award

Nominee _____

Address _____

City _____ State _____ Zip _____

Telephone (Day) _____ (Evening) _____

Troop # _____ Service Unit _____ Borough _____

Submitted by:

Name _____

Address _____ City _____ State _____ Zip _____

Telephone (Day) _____ (Evening) _____

E-mail address _____

Service Unit, Committee or Task Group _____

Please state your reasons for endorsing this nomination. Please be as specific as possible. Use additional paper if necessary. Please answer the following questions.

In what capacity are you familiar with the nominee's performance / contributions to Girl Scouting?

Please give a *detailed* description of how the nominee has delivered service beyond expectation of the position held.

List the impact and results because of the nominee’s action. How did the nominee’s contribution benefit Girl Scouting?

List other background information, community roles and services if relevant.

Appendix 5

TO BE COMPLETED BY RECOGNITION COMMITTEE

BOROUGH RECOGNITION COMMITTEE _____ ENDORSES THIS NOMINATION
_____ DOES NOT ENDORSE THIS NOMINATION

SIGNATURE OF CHAIR

DATE

COUNCIL RECOGNITION COMMITTEE _____ ENDORSES THIS NOMINATION
_____ DOES NOT ENDORSE THIS NOMINATION

SIGNATURE OF CHAIR

DATE