

LEADERSHIP DEVELOPMENT PIN APPLICATION FORM

Girl Scouts Goldenrod Council, Inc.



APPLICANT INFORMATION:

Name _____ Troop # _____

Address _____ City _____ Zip _____

Phone (Day) _____ (Evening) _____ Service Unit _____

I have completed the following five requirements.

1. ___ Applicant has completed the Orientation and Age Level course (effective 7/92).
 Date _____ Location _____ Trainer _____
 Date _____ Location _____ Trainer _____
2. ___ Two meetings beyond the troop have been attended. (e.g. Association meetings, Annual meeting)

Type of Meeting	Location	Date
_____	_____	_____
_____	_____	_____
3. ___ First Aid Training *(Please attach a copy of your card if your training WAS NOT council sponsored)*
 Location _____ Instructor _____ Date _____
4. ___ Outdoor Ed. 1 -- Location _____ Trainer _____ Date _____
 (Troop Camp License)
5. ___ Completed one year as a Leader or Co-leader or Group Coordinator
 Date appointed as troop leader, co-leader or group coordinator. _____

RETURN APPLICATION TO:
 Girl Scouts Goldenrod Service Center
 2512 North Webb Rd.
 Grand Island, NE 68803

Pin	= \$ 5.15
6.5% Sales Tax	= \$.33
Postage (if mailed)	= \$.55
TOTAL ENCLOSED	= \$

Enclose \$5.15 for the pin, plus sales tax and 55 cents for postage.
 Make checks payable to Girl Scouts Goldenrod Council, Inc.
 Omit postage when being delivered by your Membership Specialist.

COMPLETED BY COUNCIL

Applicant has [] completed [] not completed the requirements for the Leadership Development Pin.

COUNCIL APPROVED _____
 Date Pin Sent _____ or Other _____ Initialed _____