



Teen Planning Board

INTEREST FORM

GIRL SCOUTS 11-17

Applications **must** be received by February 16, 2007 to: *BGFG 3275 Walker Ave. NW
Grand Rapids, MI 49544*

Name of applicant (first, middle initial, last):	Area Code/Home Telephone:
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Email Address:

Home Address (number, street, city, zip code):

Date of Birth:	Age:	Present Grade in School:	Girl Scout Council:
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Are you currently a registered Girl Scout? *Must be registered when submitting form. <input type="checkbox"/> Yes <input type="checkbox"/> No	Please indicate: <input type="checkbox"/> Cadette <input type="checkbox"/> Senior
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	How many years have you been a Girl Scout? Include this year:
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Troop No. (or indicate non-troop):	Troop Leader's Name & Telephone Number:
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Ethnicity: Native American Asian American
Check all that apply African American Hispanic/Latino
 European American Other, please indicate

1.) What interests you about being a member of the By Girls for Girls Committee?
What do you think you will bring to the group?

2.) Explain your experience planning or leading an event.

3.) List your ideas for events, marketing, and merchandise Girl Scouts should have or create.

4.) The goals of Girl Scouting are diversity, service, and leadership. What qualities will you contribute to promoting each of these goals if selected for the committee?

5.) Do you have any special medical or physical needs that could affect your participation? If so, please elaborate on the support you will need.

Leadership: As a part of our committee, we will be electing officers for our group. Please answer the following questions regarding your leadership experiences.

6.) What qualifications do you feel you have for these leadership position(s)? Include any leadership experience you have with your troop, school, or other youth organizations, as well as what your personality or skills will add to the program.

7.) If you have never served in a leadership position before, what do you feel you can contribute to leadership and what do you feel you will gain from this experience?

8.) If you have previously served in a leadership position, what do you feel you have learned from serving in that capacity?

9.) In what ways would you share By Girls For Girls programs with girls in our council? (List any specific activities)

I have asked the following person to provide a reference for me:

Name: _____

Relationship: _____

I understand that the By Girls For Girls Committee has a series of meetings (including at least one overnight) throughout the year, and that attendance for meetings is expected for all members.

I give permission for my daughter to be photographed for Girl Scout publicity purposes.

Signature of applicant: _____

Signature of parent or guardian: _____

Date: _____

The Selections Committee will notify all applicants of their decision, in writing, by the first week of February.

REFERENCE FORM

Teen Planning Board GIRL SCOUTS 11-17

Applicant's Name: _____ Telephone: _____

Address/City/Zip: _____

I am applying for a position with the By Girls For Girls Committee, which is a planning board for events and activities for girls 11-17. This program involves a series of planning sessions, where I will have the opportunity to plan, organize, and run events. Would you please complete this reference form for me and return it to me in a sealed envelope. I have to include your reference with my application. Thank you!

Rating Scale: 1 2 3 4 5 0
 Poor Average Excellent Don't know

- _____ Acceptance of diverse populations (economic, racial, ability)
- _____ Leadership ability
- _____ Interest in or commitment to community service
- _____ Ability to resolve conflict/problem solve
- _____ Communication skills with adults
- _____ Ability to take initiative
- _____ Ability to assume responsibility
- _____ Ability to plan activities
- _____ Poise and ease in meeting people
- _____ Ability to follow through and work as a team

Please describe how this applicant will contribute to the goals of Service, Leadership, and Diversity, in addition to the strength and skills you feel they can contribute to this program.

(On the back of this form, please feel free to add any additional comments)

Reference Signature: _____ Telephone: _____

Address/City/Zip: _____