

LEADERSHIP DEVELOPMENT PIN APPLICATION FORM

1. Complete Section I of the Application.
2. To apply for Leadership Development Pin, complete **Section II** of the application.
3. To apply for additional recognition(s) leaves, complete **Section III** of the application.
4. **A copy of applicants training card must accompany application.**
5. Return the application to the council three weeks prior to receipt of the award.

> > **Section I**

Name of council: _____

Applicant Information:

Name: _____
 Address: _____
 City/State/Zip: _____
 Business address: _____
 Phone (Day): () _____
 Phone (Eve): () _____

Service Unit #: _____
 Troop/group #: _____
 Troop leader: _____
 Assistant troop leader: _____
 Group coordinator: _____

> > **Section II**

Applicant has completed the basic leadership course or appropriate group coordinator training.

Welcome to Girl Scouting

Date: _____ Location: _____

On the Level

Date: _____ Location: _____

Two meetings beyond the troop have been attended.

Type of Meeting	Location	Date

First aid and Basic Outdoor Skills training have been completed. (See #4 under Leadership Pin Requirements)

First aid training

Name: _____ Location: _____ Date: _____

Basic Outdoor Skills training

Name: _____ Location: _____ Date: _____

**RETURN APPLICATION TO: GIRLS SCOUTS EASTERN WASHINGTON & NORTHERN IDAHO
 1404 N. ASH STREET
 SPOKANE, WA 99201**

TO BE COMPLETED BY COUNCIL:

Applicant: has completed has not completed the requirements for the leadership development pin.

Council approved signature: _____

Date: _____

> > **Section III**

Please list applicants completed training in subject area(s) that have increased her skills in working with girls in troops.

DESCRIPTION OF TRAINING	LOCATION	HOURS OR CEU'S	DATE

Indicate how the additional training has helped with Girl Scout programs used with the girls:

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1404 N. ASH STREET
SPOKANE, WA 99201**

TO BE COMPLETED BY THE COUNCIL:

Applicant: [] Has Completed [] Has Not Completed the requirements for the leadership development pin.

Number of leaves to be awarded: _____

Council approved signature: _____

Date: _____