

# Application for Leadership Development Pin



## SECTION I

Application Information:

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_

Email \_\_\_\_\_

Troop/Group # \_\_\_\_\_ Service Unit \_\_\_\_\_

Troop Leader \_\_\_\_\_ Assistant Troop Leader \_\_\_\_\_

Years registered as Leader/Assistant Leader \_\_\_\_\_

## SECTION II

Applicant has completed Orientation and a Leadership Essentials course.

Orientation Date \_\_\_\_\_ Location \_\_\_\_\_

Leadership Essentials Course Date \_\_\_\_\_ Location \_\_\_\_\_

Two Leader meetings beyond the troop have been attended (Service Unit, Council meeting, etc.)

Type of Meeting	Location	Date(s)

CPR/First Aid and a beginning level outdoor training course has been completed.

CPR/First Aid Training Location \_\_\_\_\_ Date \_\_\_\_\_

Basic Outdoor Awareness Location \_\_\_\_\_ Date \_\_\_\_\_

TO BE COMPLETED BY COUNCIL

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

\_\_\_\_\_ Date \_\_\_\_\_ Council Signature

For more information, and to download this application,  
please, log onto our website: [www.girlscoutsowa.org](http://www.girlscoutsowa.org).

# Application for Leaf Attachments



Girl Scouts.

## SECTION III

The applicant has completed at least ten hours of additional education sessions in subject area(s) that have increased skills in working with girls in troops.

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_

Email \_\_\_\_\_

Troop/Group # \_\_\_\_\_ Service Unit \_\_\_\_\_

Description of Sessions	Location	Hours or CEUs	Date

Indicate how the additional sessions will help you deliver the Girl Scout program to girls.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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*TO BE COMPLETED BY COUNCIL*

Applicant has  completed  not completed the requirements for additional recognitions.

Number of workshops \_\_\_\_\_ Number of leaves to be awarded \_\_\_\_\_

\_\_\_\_\_  
Date \_\_\_\_\_ Council Approved Signature \_\_\_\_\_

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