



Application for Leaf Attachments

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.

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 _____

For more information, and to download either the Leadership Development Pin application or Leaf Attachments application, log onto our website: www.girlscoutsiowa.org.