



USA GIRL SCOUTS OVERSEAS – Spangdahlem VOLUNTEER APPLICATION

Date:

Name:

Telephone Number (Home): (Work):

APO Box:

E-mail Address: Deros:

Other places of residence in the past 5 years:

What type of volunteer service interests you?

<input type="checkbox"/> Working directly with girls.	<input type="checkbox"/> Taking a position on the OCMT.
<input type="checkbox"/> Working as a troop leader.	(Overseas Committee Management Team)
<input type="checkbox"/> Working as an assistant troop leader.	___ Secretary
<input type="checkbox"/> Serving on a troop committee.	___ Treasurer
<input type="checkbox"/> Assisting with badge projects.	___ Registrar
<input type="checkbox"/> Assisting with special events.	___ Event Coordinator
<input type="checkbox"/> Outdoor activities.	___ Camp Coordinator
Age Group Preference: <input type="text"/>	___ Cookie Manager
Availability: <input type="text"/>	___ Marketing
	___ Awards Committee
	___ Host Nation Liaison
	Other <input type="text"/>

Do you have any special skills or hobbies that you would like to share with our Girl Scouts Community?

Education and Training

Educational Institution:

Highest Year Completed: Degree or Certificate:

General Equivalency Diploma: ☐ Yes ☐ No

Language skills other than English:

Experience

List experience and any prior service that relates to the position you are applying for.

Organization Name:

Address:

Was this position: ☐ Paid ☐ Volunteer From: to

Position Title:

Responsibilities:

Supervisor: **Telephone:**

Reason for leaving:

Organization Name:

Address:

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Position Title:

Responsibilities:

Supervisor: **Telephone:**

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Address:

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Position Title:

Responsibilities:

Supervisor: **Telephone:**

Reason for leaving:

References

Please list three non-relatives who are familiar with your qualifications for a Girl Scout Service. Must provide at least 2 when applying for a position working directly with children.

Name: Relationship:
Address:
Daytime Telephone: Evening Telephone:

Name: Relationship:
Address:
Daytime Telephone: Evening Telephone:

Name: Relationship:
Address:
Daytime Telephone: Evening Telephone:

This is an application for a volunteer position in Girl Scouting for which there is no monetary compensation.

In the selection of volunteers, there shall be no discrimination against an otherwise qualified individual on the basis of race, color, ethnicity, sex, religion, national origin, socioeconomic status, age, disability, marital status, veteran status, or any other basis prohibited by state or local law.

I hereby authorize you to check all my educational, personal, and employment/volunteer references; I further authorize these references to release information to you that they have about me.

I understand that background checks are required by the US Military, state, or federal persons serving children.

I certify that my answers to the preceding questions are true and complete and that I have not knowingly withheld any information that might, if disclosed, affect my application unfavorably. I understand that any misrepresentations or omissions of facts on this application will be cause for rejection of the application or later dismissal.

Signature (Parent of guardian for a minor): Date: