



Girl Scouts®

Leadership Development Pin - Application Form

Girl Scouts of the Appalachian Council, Inc.
1100 Woodland Avenue / PO Box 3100 CRS
Johnson City, TN 37602-3100
(423) 929-8185 * 1-800-428-3991 * Fax (423) 929-8117
e-mail: agsc@naxs.com

1. Complete the application form.
2. To receive the attachment recognition(s) "Leaves," complete Leaf Application Form.
3. Return the application to the Adult Development Director at the Service Center for approval.
4. **Attach copy of Training Card.**

SECTION I - APPLICANT INFORMATION

Name _____

Troop/Group# _____ Service Unit# _____

Phone (day) _____ (evening) _____

Address _____

City _____ State _____

Zip _____ County _____

Troop Leader/Co-Leader _____

Phone (day) _____ (evening) _____

Assistant Troop Leader _____

SECTION II

A. () First Helps (Leader Orientation) _____

	Name	Date
() Basic Troop Leadership (BTL 1) _____	Trainer's Name	Date
() Basic Troop Leadership (BTL 2) _____	Trainer's Name	Date
() Child Protection _____	Trainer's Name	Date

B () Two meetings/events beyond the Troop/Group level:

	Meeting/Event	Signature to Validate	Date
1 _____			
2 _____			

C () First Aid Training _____

	Site	Signature to Validate	Date
OR			
() Certified First Aider _____	Name	Signature to Validate	Date

D. () Troop/Group Camp Training

Outdoor Course I _____	Trainer's Signature _____	Date _____
Outdoor Course II _____	Trainer's Signature _____	Date _____
Outdoor Course III _____	Trainer's Signature _____	Date _____

OR

Troop/Group Camp Certified Person (Please attach copy of their Training Card)

Name _____	Signature to Validate _____	Date _____
------------	-----------------------------	------------

Service Unit Manager's Signature _____	Date Reviewed _____
--	---------------------

TO BE COMPLETED BY ADULT DEVELOPMENT DIRECTOR

Applicant:

Has
 Has Not

completed the requirements for the Leadership Development Pin.

Adult Development Director Signature _____	Date Reviewed _____
--	---------------------



Girl Scouts®