

Girl Advisory Board

Ready to speak your mind and share your voice to make Girl Scouting
the best experience possible?

Want to meet other older Girls Scouts from our council?

Do you have ideas about events you would like to see council or your communities offer for older girls?

If so, then Girl Advisory Board (GAB) is for you! As a part of GAB you will be able to give input as to what you would like see offered in our council and community, share your opinion with our CEO and staff, help plan events and make a difference in our council. GAB is a great opportunity to utilize your leadership skills while having fun! The Girl Advisory Board will meet monthly to discuss and plan council activities. The first GAB meeting is to be announced.

Who Can Join GAB?

GAB will be offered at the Council level. Girls must be ages 11-17 to participate. Exact age ranges for each level are listed below.

Want to be a GAB Advisor?

Calling all GAB advisors! Do you like working with older girls ages 11-17 and consider yourself teen savvy? Are you between the ages of 18-29? GAB advisors are adults between the ages of 18-29 who want to work with Cadette, Senior and Ambassador Girl Scouts. Advisors will provide support and guidance to GAB members during the year.

Have Questions About GAB?

For questions or more information please contact customercare@girlscoutsgwm.org

GIRL ADVISORY BOARD APPLICATION

Instructions:

1. This form is to be filled out **by the girl (age 11-17)** who is applying.
To be part of the Girl Advisory Board:
2. Please print or type when filling out the form.
3. Return form to: Program Department
Girl Scouts of the Green and White Mountains
PO Box 10832
Bedford, NH 03110



Name of Applicant _____ Date _____

Street Address _____

City _____ State _____ Zip _____

Phone # _____ Age _____ Grade _____ School _____

Troop/Group # _____ OR Individual Girl Member Email _____

Leader/Advisor's Name _____ Service Unit _____

Why do you want to be on the Girl Advisory Board? _____

Section I: TRAINING AND EXPERIENCE

What Girl Scout trainings have you taken?

► Program Aide: Yes Date _____ No LIT: Yes Date _____ No CIT: Yes Date _____ No

► Any others? (e.g., Red Cross First Aid, CPR, babysitting): _____

What is your experience working with a team?

Position: _____ Organization: _____

Briefly describe your responsibilities: _____

When and how much time did you spend in this position? _____

Briefly describe your current participation in Girl Scouting. _____

Briefly describe your activities outside Girl Scouting, including school, community and extra-curricular activities.

Section II: SKILLS AND INTERESTS

Please rate yourself honestly on the following:

	Not at all	Moderate	Good	Exceptional
Maturity				
Adaptability/Flexibility				
Open-Mindedness				
Cultural Sensitivity				
Global Awareness				
Responsibility				
Team Player				
Initiative				
Attitude/Sense of Humor				
Stamina/Energy Level				
Verbal/Written Communication Skills				
Interpersonal Skills				
Leadership Skills				

Section III: REFERENCE INFORMATION

I have asked the following person to provide a reference for me:

Name _____ Position _____

Address _____

City _____ State _____ Zip Code _____

Phone _____ Email _____

Section III: SIGNATURES

I have read the attached position description, and I understand my responsibilities. If I am no longer able to fulfill my duties, I will inform the Program Department.

Signature of Applicant _____ Date _____

Parent/Guardian Permission

I have read the position description for my daughter's application for the Girl Advisory Board. To the best of my knowledge, _____ has a clear understanding of what it means to apply for this position, and if selected, she has my permission to participate.

I also understand that this position involves travel to a meeting each month. I will make the necessary arrangements to drop off and pick-up my daughter.

Applicant's Parent/Guardian Signature _____ Date _____

GIRL ADVISORY BOARD REFERENCE

Instructions:

1. The girl who is applying to be in the Girl Advisory Board fills out Part I and gives this form to the person who will write the reference. (This person could be a leader, advisor, or other adult who knows the applicant well.)
2. Please print or type when filling out the form.
3. Give this form to the reference person.
4. The reference person is to send this form to: Girl Scouts of the Green and White Mountains,
1 Commerce Dr, Bedford, NH 03110 Attention: Program Department

Part I: To be completed by applicant.

Name of applicant _____ Date _____

Street Address _____

City _____ State _____ Zip Code _____

Phone Number () _____ Troop # _____ SU: _____

Part II: To be completed by the person providing the reference.

I am applying for the Girl Advisory Board. This project involves working as part of a team with girls my own age, as well as adults, to develop and implement new program activities for Girl Scouts. I would appreciate it if you would provide a reference for me using this form to describe my qualifications.

How long have you known the applicant? _____

In what capacity have you known her? _____

Check one rating in each category to assess the following qualities of this applicant.

Put N/A if you do not know.

	Poor	Fair	Average	Above Average	Superior	Not Applicable
Is dependable and responsible						
Relates well to new people						
Is able to communicate and share ideas and feelings						
Accepts differences in people						
Works well with peers						
Relates well to adults						
Is adaptable and flexible						
Shows humor and spontaneity						
Takes part in decision-making						
Has problem-solving ability						

Please describe the applicant's special strengths and skills as they relate to a position of leadership.

Please give specific examples. _____

Please describe the applicant's area of weakness as it might relate to new experiences and people.

Name (printed) _____

Signature _____

Position _____ Date _____

Street Address _____

City _____ State _____ Zip Code _____

Phone Number (_____) _____

Email _____