girl scouts of the green and white mountains

Travel Adult Application

Instructions:

1. Type or print clearly using black or blue ink.
2. Fill out the application completely. Make a photocopy for yourself.
3. Make sure you sign the last page.
4. If you need more space on your application, you may continue your answers on an additional sheet of paper.

Section I: Personal Data

Adult Information:

Name (first, middle, last): _____ Date of Birth: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: (Cell)_____ (Home)_____ (Other)_____

E-Mail: _____

T-shirt Size (circle one) Adult: S M L XL XXL Passport: ☐ Yes ☐ No

Emergency Contact Information

Emergency contact name: _____ Relationship: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: (Cell)_____ (Home)_____ (Other)_____

E-Mail: _____

Health Information

Do you have any special needs or health conditions? Yes No

If yes, please describe below, including any medication that may be needed during the trip.

_____

_____

Section II. Skills Inventory

A. Please Check all that apply to you:

☐ Registered Girl Scout ☐ Approved Adult ☐ Age 18 or Older ☐ Lifeguard Certified

☐ First Aid Certified ☐ CPR Certified ☐ Nurse or Doctor

B. **Languages:**

Tell us what language(s) in addition to English you speak, the number of years you have studied, and where you learned the language.

Language	Number of Years Studied	Where Learned (home, school, other)

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C. Travel Skills:

Using the following scale below, please indicate your skill level in the following areas:
4=Highly Experienced; 3=Above Average; 2=Average; 1=Below Average; 0=No Experience

Skill	Level	Skill	Level
Traveling by plane		Conflict Resolution	
Traveling by bus/train		Personal budgeting (handling $$ over several days)	
Backpacking/hiking		Cooking/Meal Planning	
Getting along with others		Event Planning	
Leadership Ability			

D. Responsibility and Experience:

Have you led a trip or had significant responsibility for a group of teenagers during a trip? ☐ Yes ☐ No
If you answered yes, please fill in the chart:

Purpose of Trip	Length	Where and how did you travel?
Example: Church Youth Group Mission	5 days	Costa Rica, plane & bus

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Section III: Short Answer

1. Briefly describe your participation in Girl Scouting (as a girl, adult, leader, service unit, events...).
2. Briefly describe your experiences with people from different social, racial, cultural, religious, and economic backgrounds. What did you learn and/or gain from these experiences?
3. Briefly describe any experience you have dealing with emergency situations. What was your role? How did you handle the situation?
4. Briefly describe your experience working, planning, living, traveling, etc., with teenage girls (other than your own daughter.) Include experiences with non-Girl Scout groups

Section IV: Essay

Please describe why you want to volunteer for this Travel program position and why you should be chosen to participate. Please be specific about what knowledge and skills you would bring and what you would like to bring home to share with other Girl Scout girls and adults.

Section V: Verification, References and Permission

A. Verification:

1. Name of Trip: _____
2. Departure Date: _____

B. References:

Please note that references cannot be relatives. References must be mailed or emailed directly to the Girl Scout office by the individuals completing the reference for you. I have asked the following individuals to provide references:

3. Name of Reference: _____
   Email: _____ Phone: _____
4. Name of Reference: _____
   Email: _____ Phone: _____

C. Responsibility:

I understand that once selected:

I will be responsible for a group of 6-10 girls for the period of the Travel program. Yes No

I will be responsible for helping coordinate money earning opportunities for girls selected to attend.

☐ Yes ☐ No

D. Applicant:

I, _____ [insert your name], have read the event description and Travel position descriptions. I would like to volunteer for_____ [insert Travel program name]. If I am selected, I can commit to attending and actively participating in meetings before and after the trip, respond in a timely manner to emails, and complete all necessary paperwork in a timely manner.

Applicant's Signature: _____ Date:_____

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Please Return To:

GSGWM, 1 Commerce Drive, Bedford, NH 03110-6835

Date _____

_____ has expressed an interest in a volunteer position of Travel Chaperone in Girl Scouting and has given your name as a reference. Your response to the questions and statements below would be appreciated as the applicant may not be placed in a position until references have been received. Please return this referral as soon as possible. We ask for your thoughtful and honest opinion as it is the mission of Girl Scouts of the Green and White Mountains to appoint volunteers who will be positive role models for our girl and adult members. Be assured that any information you provide will be held in confidence.

We appreciate and thank you for your prompt response.

The applicant will be volunteering for a trip to

The applicant will be working with girls. She/he will be responsible for girls' safety, supervision, ensuring all girls are included and have a positive trip experience.

The applicant will also be working with other adult chaperones as a team, take on group leadership responsibilities, and ensure that all adults are supporting the girls to have a positive trip experience.

1. How long have you known the applicant? _____
2. What is your relationship to the applicant (work, social, etc.)? _____
3. Please comment regarding the applicant's skills and attitudes toward children.

_____

_____

_____

And toward adults. _____

_____

_____

4. Please comment on the applicant's ability to follow through on assignments.

_____

_____

_____

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5. What words would you use to best describe your knowledge of the applicant? Please circle:

Positive/Negative	Tolerant/Intolerant	Outgoing/Shy
Organized/Disorganized	Flexible/Controlling	Punctual/Tardy
Reliable/Unreliable	Patient/Impatient	

6. What would you say are her/his greatest strengths? _____
_____
_____
Weaknesses? _____
_____
_____

7. Do you feel this applicant is able to adjust to different cultural situations?
_____
_____
_____

8. To your knowledge, is there anything in the applicant's background that would lead you to NOT recommend that we place her/him in this volunteer position? If so, please explain. _____
_____
_____
_____

9. Additional Information:
_____
_____
_
_____

Name: _____ Phone*: _____
_____

Address: _____

City: _____ State: _____ Zip: _____

**Will be used only if additional information is needed*

Signature: _____ Date: _____

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If you wish, please provide us with an additional reference for the applicant.

Name: _____ Phone: _____

Address: _____

City: _____ State: _____ Zip: _____

Thank you!