

# 2020 NATIONAL COUNCIL DELEGATE COUNCIL APPLICATION FORM

Please complete the following and forward by email to [governancemanager@gssc-mm.org](mailto:governancemanager@gssc-mm.org), or by fax (864-272-3394) or mail no later than September 20, 2019. Applications are reviewed by the Nominating Committee with criteria outlined in the 2020 GSSC-MM National Council Delegate Information Packet.

Name:   

First
Middle
Last

 Ms.  Mrs.  Miss  Mr.

Home Address:  Home Phone:

Employer:  Title:

Business Address:  Phone:

Cell:

Email:

I am a currently registered or Lifetime member of Girl Scouting: Yes  No

My Girl Scout membership card #:

I was a Girl Scout for  years as a girl member and  years as an adult member in  different Girl Scout councils.

**Work Experience:** Please attach a brief history of your professional history and skills or a copy of your personal resume.

Served Previously as a GSSCMM Council Delegate?    Served Previously as a GSSCMM National Delegate?

**Girl Scout Experience** (list positions held and recognitions received):



What experience do you have in either a policy-influencing or policy-making role in Girl Scouts? Were you satisfied with the process or can you share your feedback on how to improve the process?

Please describe how you demonstrate the Council Delegate selection criteria outlined in the 2020 National Council Information Packet.

Age Group:

14-17  18-29  30-39  40 – 49  50 – 59  60+

I will be 18 years of age ON OR BEFORE October 20, 2020? Yes  No

Racial/Ethnic Affiliation:

A. Asian/Pacific Islander  American Indian/Alaskan Native  Black  White   
B. Also of Hispanic Origin? Yes  No

Schools or College(s):

Name & Location	Major/Degree	Dates

If currently a high school student:

Name of High School	City	Principal Name, Phone & Mailing Address

I certify that all information provided is true and accurate.

Signature	Date
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