



Girl Scouts of Eastern South Carolina President's Award Nomination Form

Please submit to GSESC by February 28, 2025

Name of Service Unit: [Click here to enter text.](#)

Name of Service Unit Chair: [Click here to enter text.](#)

Address: [Click here to enter text.](#)

Telephone: (home) [Click here to enter text.](#) (work) [Click here to enter text.](#) E-mail address [Click here to enter text.](#)

- All Service Team Members are active, registered Girl Scouts:
Yes No
- All Service Team Members have met the requirements and expectation of positions held (i.e. training, paperwork on file, submission of reports).
Yes No
- The Team reflects the diversity of the target audience or area it serves, in girl and adult membership, in all pathways offered.
Yes No

Describe how the Team has delivered outstanding service that has significantly contributed to meeting one or more of the council's mission-delivery goals. Please name the goals.

[Click here to enter text.](#)

Describe how this Team actively recognized, understood, and practiced the values of inclusive behavior.

[Click here to enter text.](#)

Please attach any supporting documentation to indicate how the Team met the criteria for this award (i.e. membership data, Service Unit event information, Service Unit volunteer support resources etc.)

For Office Use Only

The Adult Recognitions Committee endorses this nomination

Signature of Board Chair: [Click here to enter text.](#)

Signature of CEO: [Click here to enter text.](#)

The Adult Recognitions Committee denies this nomination

Reason Denied: [Click here to enter text.](#)