

A copy of this form should be kept on file in the service unit. Type or use black ink.



NAME: _____
DATE: _____

Girl Scouts of San Jacinto Council
ADULT VOLUNTEER SERVICE RECORD

Region: _____ Community: _____ Month/Year updated: _____

Address: _____ Home Phone (_____) _____

City: _____ Zip Code: _____ Work Phone (_____) _____

Occupation: _____

Years registered: Girl _____ Adult _____ Other Council _____ GSSJC _____

MEMBERSHIP NUMERALS RECEIVED (*Please state year received, including girl & adult years*):

5 year _____	25 year _____	45 year _____
10 year _____	30 year _____	50 year _____
15 year _____	35 year _____	55 year _____
20 year _____	40 year _____	__ year _____

YEARS OF SERVICE PINS RECEIVED (*Active adult years only, please state year received*):

5 year _____	25 year _____	45 year _____
10 year _____	30 year _____	50 year _____
15 year _____	35 year _____	55 year _____
20 year _____	40 year _____	__ year _____

COUNCIL AWARDS RECEIVED (*Please state year received*):

Appreciation Pin _____	Thanks Badge _____	Thanks Badge II _____
Honor Pin _____	Continuing Service _____	Family Award _____
Volunteer of Excellence _____	Other _____	Lifetime Achievement _____

COMMUNITY/REGION AWARDS (*Please state year received*):

<u>Community/Service Unit</u>	<u>Region/District</u>
Outstanding Leadership Team _____	Outstanding District Volunteer _____
Outstanding Volunteer _____	Other _____
Outstanding Leader _____	Other _____
Other _____	Other _____
Other _____	Other _____

VOLUNTEER SERVICE BEYOND GIRL SCOUTING:

DATE	ORGANIZATION	TYPE OF SERVICE
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____



