

Girl Scouts of Southern Illinois
Community Service Bars Proposal Form



Approval is required prior to beginning work on your award!

Award you will be seeking _____

Name _____

Address _____ City _____ ST _____ Zip _____

Phone _____

Email _____ Service Unit # _____ Troop # _____

Organization Selected _____

Describe training provided, or attach a training outline from the organization you've selected. (A minimum of 4 hours of training is required.)

Approval

Council Program Staff signature: _____ Date: _____

Submit forms for review to:

GSSI Program Dept., #4 Ginger Creek Parkway, Glen Carbon, IL, 62034, fax to 618-692-0685, or email tbarnes@gssofsi.org. Contact Tracy at 618-692-0692 or 800-345-6858 x 112 or email tbarnes@gssofsi.org with any questions.