



Hidden Heroine Award

GSGCNWI Adult Recognition Awards Criteria

The Hidden Heroine Award recognizes the efforts of an adult volunteer who embodies the Girl Scout principle to *help where I am needed*. This volunteer is available to provide over and above assistance to special projects, ongoing tasks, and support of Girl Scout programs in this person's service unit, program delivery group, or other operational or governance group. This volunteer continually accepts assignments in order to keep Girl Scouting thriving. This volunteer's outstanding service has a positive impact on Girl Scouting and merits recognition.

Criteria:

1. An adult member of the Girl Scouts of the U.S.A
2. Has a history or reputation of always being there when needed, picking up the slack, stepping in at the last moment, or volunteering for additional assignments or responsibilities beyond the expectations of her/his volunteer position
3. Demonstrated her/his commitment to Girl Scouting by continually working to provide the best possible experience for girls or adults
4. Nominated by a member of Girl Scouts of Greater Chicago and Northwest Indiana and is supported by another member familiar with his/her service to Girl Scouting
5. The candidate is to be recommended to the service unit recognition team or operational or governance group familiar with the candidate's service. The recommendation is supported by one other Girl Scout individual.
6. Requires service unit or governance group approval
7. The service unit or operational or governance group will present the Hidden Heroine award to the recipient.

Please submit your list of approved nominations to the council by the February 15th deadline for inclusion in the recognition program book.



GSGCNWI Award Nomination Form Service unit Level Awards

Name of Nominee : _____

Nominated for:

☐ Hidden Heroine Award ☐ New Found Treasure Award

Address of nominee: _____
Address City/State Zip code

Phone number of nominee: _____
Daytime Evening

E-mail address: _____
Please print

Current position(s) of nominee: _____

Years in position: _____

Nominee's number of years in Girl Scouting (for information only; not used as a criterion for recognition): _____

Service unit _____ Gathering Place (if applicable) _____

Previous positions held by nominee:	(indicate dates if known):	Date

Please give a detailed description of how the nominee has delivered service beyond the expectations of the position held. (May be continued on a separate sheet):

Specific audience(s) benefiting from service:

List other background, community roles and services if relevant:

These awards require a nomination plus one person who supports the nomination.

1. Name, address, telephone number, and e-mail of individual **submitting nomination**

Name	Position	E-mail
<hr/>		
Address	City/State	Zip code
<hr/>		
Daytime Phone	Evening Phone	Cell Phone
<hr/>		

2. Name, address, telephone number, and e-mail of individual **supporting this nomination.**

Name	Position	E-mail
<hr/>		
Address	City/State	Zip code
<hr/>		
Daytime Phone	Evening Phone	Cell Phone
<hr/>		

Signature of support: _____
Date

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