



NEW FOUND TREASURE AWARD Adult Recognition Awards Criteria

The New Found Treasure Award recognizes the efforts of an adult volunteer who is new to Girl Scouting and has hit the ground running. This volunteer has been a registered member for a short time but, has made a positive impact on Girl Scouting. This person's performance is so outstanding that it merits recognition at the local level.

Criteria:

- 1. Is an adult member of the Girl Scouts of the U.S.A. and has been a registered in the last membership year (October September) and has reregistered for a second year.
- 2. Has completed required orientation and/or training for her/his position.
- 3. Has "hit the ground running" and provided outstanding service to Girl Scouting at the troop level as a leader, assistant or co-leader, or troop committee member, or as a member in any other operational or governance capacity (i.e. day camp, camp recreational program facilitator, product program volunteer, council task group, board committee, service team member, trainer, etc.).
- 4. The result of their short time in Girl Scouting has had a positive impact on Girl Scouting.
- 5. Is nominated by a member of Girl Scouts of Greater Chicago and Northwest Indiana and is supported by another member familiar with her service to Girl Scouting.
- 6. Requires service unit or operational or governance group approval.
- 7. The service unit or operational or governance group will present the New Found Treasure award to the recipient.

Submit nomination form to your Service Unit contact by April 1, 2022.



HIDDEN HERO AWARD Adult Recognition Awards Criteria



The Hidden Hero 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 their 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 their 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 Hero award to the recipient.

Submit nomination form to your Service Unit contact by April 1, 2022.



AWARD NOMINATION FORM Service Unit Level Awards

Name of Nominee:				
Nominated for: 🛛	Hidden Hero Award		New Found Trea	asure Award
Address of nominee:	Address		City/State	Zip code
Phone number of no	ominee:			
E-mail address:	Please print			
Current position(s) of	of nominee:			
Years in position:	Nominee's nu	umber	of years in Girl Scou	ting:
Service Unit:	Gathering Pla	ace (if a	applicable)	
Previous positions h	eld by nominee: (indicate d		known):	
-	ed description of how the e position held. (May be contin			service beyond the

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
Address	City/State	Zip code
Daytime Phone	Evening Phone	Cell Phone

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

	Name	Position	E-mail
	Address	City/State	Zip code
	Daytime Phone	Evening Phone	Cell Phone
Signature	of support:		Date