



**Girl Scouts of Greater Chicago and Northwest Indiana, Inc.  
ADULT VOLUNTEER SERVICE  
RECORD**

**NAME:** \_\_\_\_\_

**DATE:** \_\_\_\_\_

*A copy of this form should be kept on file in the service unit.*

Service Unit \_\_\_\_\_ Troop \_\_\_\_\_ Month/Year updated: \_\_\_\_\_

Address: \_\_\_\_\_ Home Phone (     ) \_\_\_\_\_

City: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Work Phone (     ) \_\_\_\_\_

Email address: \_\_\_\_\_

Occupation: \_\_\_\_\_

Years registered: Girl \_\_\_\_\_ Adult \_\_\_\_\_ Other Council \_\_\_\_\_

**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 _____	Hall of Fame _____	Other _____

**Service Unit**

Volunteer of Excellence \_\_\_\_\_

Hidden Heroine \_\_\_\_\_

New Found Treasure \_\_\_\_\_

Other \_\_\_\_\_

**VOLUNTEER SERVICE BEYOND GIRL SCOUTING:**

<b>DATE</b>	<b>ORGANIZATION</b>	<b>TYPE OF SERVICE</b>
_____	_____	_____
_____	_____	_____
_____	_____	_____



**NAME:**

(Only include adult information)

YEAR (Past to Present)	POSITION/TITLE	TYPE OF SERVICE/TASK	SERVICE TO: (Troop, Service Unit, District, Community, Region, or Council-wide)
2015-2016	<i>LEADER</i>	<i>BROWNIE TROOP</i>	<i>TROOP #13004 (EXAMPLE)</i>