

## Volunteer Application for Gold Award Reviewer

Incomplete applications will not be considered.

Personal Information						
First Name:	Full Middle	Name:		Las	st Name:	
Mailing Address:		City:			State:	Zip code:
Tili il i i Di	T =					
Telephone - Day:	Evening:			Ce (	II: )	
Best way to contact you:	, , , , ,		Email Address	s:	,	
Best times to contact you for a phone interview, if selected:			☐ Female ☐ Male	Are you 18 years of age or older?  ☐ Yes ☐ No		
Selected.			□ Iviale		ies Lino	
Experience & Availability						
Have you had previous G (training is provided, no previous			ence? □ Ye	es	□ No	
If yes, in what capacity?			How long	g did	you serve in that	role?
Have you served as a rev	viewer for an	other organiza	ation?	es	□ No	
If yes, in what capacity?			How long	g did	you serve in that	role?
All volunteers with GSHP		a criminal ba			•	ve a criminal
background check on file	•		☐ Yes		10	
If selected, will you agree	to complete	a background	d check? ☐ Ye	es l	□ No	
Are you able to travel to t	he Harrisbur	g Service Cen	iter at least one	time	e per year?   Yes	s □ No
Please list days/times you	u are able to	volunteer:				

Please see reverse



In order to earn the Gold Award, girls must complete a service project that makes a lasting impact. In your opinion, what makes a service project impactful?  This is an application for a volunteer position in Girl Scouting for which there is no monetary compensation. In the selection of volunteers, there shall be no discrimination against an otherwise qualified individual on the basis of race, color, religion, sex, age, national origin, sexual orientation, marital status, physical or mental disability, ancestry, genetic information or any other protected class status.  I understand criminal background checks may be required by state or federal law for persons serving children or may otherwise be
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I understand criminal background checks may be required by state or federal law for persons serving children or may otherwise be
conducted by Girl Scouts and I understand these checks may also be conducted on other individuals in my household.
I understand that if appointed a volunteer position, I will be required to comply with Girl Scouts of the USA and Girl Scouts in the Heart of Pennsylvania policies and standards.
I understand that any misrepresentation, omission or falsification of any fact from this application or during any interview will be cause for rejection of this application or dismissal from volunteer services. I also understand that acceptance for volunteer service is subject to verification of references.
Applicant Signature Date