

**LEADERSHIP DEVELOPMENT
PIN APPLICATION**

Please refer to the Leadership Development pin requirements for specific criteria.

Mail completed application to:
Adult Development Department
Girl Scouts - Diamonds
1811 Arkansas Boulevard
Texarkana, AR 71854

by: Feb. 15

Service Unit _____ Troop # _____ Date _____

Name _____

Address _____

City _____ State _____ Zip _____

Daytime Phone # (____) _____ - _____ Evening Phone #(____) _____ - _____ Cell #(____) _____ - _____

Email Address _____ @ _____

Current Position(s) in Girl Scouting _____

Are you a currently registered Girl Scout volunteer? Yes No

Have you completed one year in the position of troop leader/advisor or assistant leader/advisor or group coordinator (adult position code 01, 02, 03)? Yes No

Have you completed basic orientation and level training for the level with which you are currently working? Yes No

List the appropriate trainings you have completed with the course names, dates of attendance and instructor's name.

Course Name	Date(s)	Instructor(s)	Hours Attended
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To be completed by council:

Has applicant met all requirements? Yes No

Council-Approved Signature

Date