

PERSONAL INFORMATION

Girl's First Name: _____ Last Name: _____
 Primary Phone#: _____ Email Address: _____
 Address: _____ City: _____ Zip: _____
 Troop #: _____ Troop Leader: _____ Leader's Phone #: _____
 Girl Scout Grade Level: **C S A** Current Age: _____ Grade: _____
 T-Shirt Size (adult sizes): _____ Camp Name: _____

SKILLS AND LEADERSHIP EXPERIENCE

Trainings Completed: () PA Core Training () PA Specialization Training () CIT Training
 () Other _____

Previous Leadership Experience: _____

Previous Leadership Positions, training or experience held in troop, school or other: _____

List 4 adjectives that describe you: _____

Define Leadership (in detail): _____

List qualities of a role model: _____

I CAN DO THE FOLLOWING

Rate your comfort level for each: 1 = Well Enough to Teach 2 = Well Enough to Enjoy 3 = Not Well 4 = Not Well at All

_____ Cooking	_____ First Aid	_____ Outdoor Skills
_____ Crafts	_____ Games	_____ Science
_____ Dance	_____ Knots	_____ Songs

List any sports or extra-curricular activities in which you actively participate:

What skills would you like to learn:

List anything you want us to know about you:

At event and camps what position/job would you prefer?*: _____

(job placement based on staff discretion)

What age level do you prefer to work with? D B J C (circle one) Why?

Attach a Photo of Yourself

Trainee's Signature: _____ Date: _____