



Date Received _____

Worcester Service Center:
 115 Century Drive, Worcester, MA 01606

Holyoke Service Center:
 301 Kelly Way, Holyoke, MA 01040

Nomination Form for Board of Directors, Board Development Committee and National Delegates

The purpose of this form is to bring forward the names of people who can make a valuable contribution to the Board of Directors, the Board Development Committee or as a Delegate to the National Council Session representing Girl Scouts of Central and Western Massachusetts. Please use this form to nominate yourself or someone else. Submission instructions are on reverse.

Persons who serve on the Board of Directors, Board Development Committee and as Delegates must:

1. accept the principles, beliefs, and purpose of Girl Scouting;
2. understand cultural, social, and economic trends, and their effect on Girl Scouting and its activities;
3. have the ability to weigh facts and issues for decision-making; and
4. be available to attend regular meetings.

Nominee

The individual listed below is being nominated for the following:

- Board of Directors
 Board Development Committee
 Girl Member of the Board
 National Delegate

Title: _____ First Name: _____ Last Name: _____

Address: _____ City: _____ State: _____ Zip: _____

Home Phone: _____ Business Phone: _____

E-mail: _____

Place of Employment: _____ Title: _____

Address: _____ City: _____ State: _____ Zip: _____

Referral Submitted By

Check box if you are submitting your own name.

Title: _____ First Name: _____ Last Name: _____

Address: _____ City: _____ State: _____ Zip: _____

Home Phone: _____ Business Phone: _____

E-mail: _____

What is the best way to contact you? _____

Describe your involvement in Girl Scouting: _____

Why do you believe this person would be a valuable leader of the Board of Directors, Board Development Committee, a council committee or as a Delegate to the National Council Session? Please be specific, including information such as other volunteer service, boards on which the person has served, skills that could benefit Girl Scouting, and/or Girl Scout experience (here or in other councils). We may contact you to learn more about this person.

Have you discussed with the person that you are recommending them to Yes No If yes, when? _____
us? Does the person expect us to contact them? Yes No

Please complete this form and return (mail, e-mail or fax) to:

Theresa Lynn, CEO
Girl Scouts of Central and Western Massachusetts
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Fax: 413-536-1383, Attn. Theresa Lynn
E-mail: TLynn@gscwm.org