

Local Community Involvement/Leadership Activities

Troop # _____ Grade Level _____ Service Unit _____

Type of Activity:

Who benefitted or how did the community benefit?

Date of activity: _____

Adult Girl Scout Volunteer contact: _____ Phone: _____

Girl Stories? Examples of Leadership? Girl Reactions?

Please feel free to attach any photos/local newspaper clippings if available.

PLEASE SEND TO:

KRIS PARKER
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400 Robert Street South
Saint Paul, MN 55107

Or: Kristine.parker@girlscoutsrv.org