

Attn: Board Development Committee Chair
Referral Prospective Candidate

PROSPECT'S INFORMATION			
Name:			
Street Address:			
City:	State:	Zip:	County:
Professional position (if applicable):			
Company (if applicable):			
Home Phone (with area code):	Business Phone (with area code):	Fax (with area code):	
Email Address:			
I am referring this person for consideration in the following position(s): <input type="checkbox"/> Board of Directors <input type="checkbox"/> Girl Member to Board of Directors (Age ____; must be 14 years of age or older) <input type="checkbox"/> Board Development Committee <input type="checkbox"/> Delegate to National Council Meeting <input type="checkbox"/> Board Committee (please specify) <input type="checkbox"/> Other (please specify)			
What skills or attributes does this person possess that would benefit the council? Please explain.			
Please describe this person's involvement in or interest in Girl Scouting.			
Please describe this person's community commitments.			

REFERRER'S INFORMATION	
Name:	Date:
Street Address:	
City, State, Zip:	
Home Phone # (with area code):	Business Phone # (with area code):
Email Address:	

Feel free to share additional comments on reverse. Be sure that all information on this form is complete.