

2018-2019 Global Arms of Advocacy (GAA) Application

Applicants: Please complete and submit this application by midnight on Wednesday, Sept. 5.

This PDF application is provided for you to review and prepare your responses ahead of time. However, the actual application submission must be completed online. To access the application, please visit: www.sdgirlscouts.org/teens.

ρiC	ase visit. www.saginscouts.org/teens.	
1. `	Your information: First and last name: Age: Grade (in fall): Phone (999-999-9999): Email:	Mailing address: City: State: Zip code:
2.	Parent or guardian information: Name of parent or guardian: Email: Phone number (e.g. 999-999-9999):	
3.	Are you a currently registered Girl Scout? Ves No	
4.	If yes, how long (in years) have you been a member. If no, please leave response blank.	
5.	I can attend a peer interview on the following date(s): Sunday, Sept. 16 between 3:30-4:30 p.m. Alternative date (only if necessary): Wednesday, Sept. 19	
6.	Do you know anyone currently in or applying to this group? If so, who? If no, please respond "no.' [short answer]	
7.	. Why do you want to be a part of GAA and how will you contribute? [short paragraph]	
8.	Name a specific experience in which you used your leadership skills to overcome obstacles in a group setting. [short paragraph]	
9.	. Tell us about an issue you're passionate about and that you've advocated for/against. [shor paragraph]	
10.	0. What do you think are your best qualities? What are some qualities you look forward to improving? [short paragraph]	
11.	What's your favorite song lyric and why? [short paragraph]	
12.	 With this signature, I commit to participate fully and actively if selected to be a member of 2018-19 GAA group: [signature box] 	

13. I support this application (parent/guardian signature): [signature box]