

Girl Scouts of Montana and Wyoming

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ANNUAL VOLUNTEER REVIEW

Name: _____ Date: _____
 Address: _____ City/Zip: _____
 Telephone: (day) _____ (evening) _____ (cell) _____ E-mail: _____
 Service Unit: _____ rpt code _____ Troop # _____ Level: D B J C
 Council contact's name: _____

1. During the past year, I have served as a:

	<u>Completed Training</u>	<u>Date Completed</u>		<u>Completed Training</u>	<u>Date Completed</u>
<input type="checkbox"/> Leader	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____	<input type="checkbox"/> Product Sales Parent	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____
<input type="checkbox"/> Asst. Leader	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____	<input type="checkbox"/> Other _____		
	<u>Completed Training</u>	<u>Date Completed</u>		<u>Completed Training</u>	<u>Date Completed</u>
<input type="checkbox"/> Service Unit Manager	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____	<input type="checkbox"/> Registrar	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____
<input type="checkbox"/> Sec./Comm. Coordinator	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____	<input type="checkbox"/> Troop organizer	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____
<input type="checkbox"/> Treasurer	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____	<input type="checkbox"/> Troop Coach	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____
<input type="checkbox"/> Product Sales Manager	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____	<input type="checkbox"/> Delegate	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____
<input type="checkbox"/> Event coordinator	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____	<input type="checkbox"/> Service Team Member:	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____
<input type="checkbox"/> Outdoor specialist	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____	<input type="checkbox"/> Other _____		

2. I have seen and/or received and completed copies of the following:
 (Indicate with a C if completed and on file in Service Unit/Council Office)

Position Description	Yes _____	No _____
Volunteer Application	Yes _____	No _____
Appointment Letter	Yes _____	No _____

3. Based on my position description and my volunteer activities this past year, I would rate my efforts/performance:
 (needs improvement) 1 2 3 (meets expectations) 4 5 (outstanding)

4. If I could improve one area of my leadership skills, it would be _____

5. I received support and help from membership staff or my service team in the following areas: _____

6. In the future, I would like additional support and help in the following areas: _____

7. I am interested in continuing in this position: Yes No Comments: _____

8. I would like information about other volunteer positions: Service Unit Team Council Trainer Council program events

9. Adults working with TROOPS, please respond to the following:

- a. The troop was represented at (#) _____ service unit leader meetings.
- b. The girls in the troop were involved in planning troop activities. Yes No
- c. I am aware of the council web site and have used it as a resource for information and documents. Yes No
- d. We have a copy of Safety Wise and Here's How and we use it regularly in troop planning. Yes No
- e. A troop camp certified adult helped girls plan, prepare, and carry out troop camping. Yes No

10. Adults who are part of the SERVICE TEAM (consultant, organizer, registrar, etc.), please respond to the following:

- a. I attended service team and/or leader meetings as necessary. Yes No
- b. I contributed to the service unit in the following ways: _____