



# Girl Scouts of Eastern South Carolina Best Practices Application

The Best Practices initiative is designed to recognize extraordinary programming for girls on the Service Unit or Troop level. Programs will be judged in one of four categories on the Service Unit and Troop level. 1<sup>st</sup>, 2<sup>nd</sup>, and 3<sup>rd</sup> place certificates will be awarded. **Deadline to apply is February 28, 2024.** Events must have occurred between **October 1<sup>st</sup> and September 30<sup>th</sup>.** **NO LATE ENTRIES OR PREVIOUS INCLUSIONS WILL BE CONSIDERED. Troop Best Practices are not reviewed by the Service Unit Recognitions Committee.** Complete the application and submit to: Girl Scouts of Eastern South Carolina, North Charleston Service Center, 7257 Cross County Rd, North Charleston, SC, 29418.

**Service Units and Troops may only submit ONE entry per category. Please print or type legibly. Annual/repeat events are only eligible once for consideration.**

THIS PROGRAM SHOULD BE JUDGED AT THE FOLLOWING LEVEL (MUST CHECK ONE):

- SERVICE UNIT \_\_\_\_\_
- TROOP # \_\_\_\_\_ GRADE LEVEL \_\_\_\_\_ SERVICE UNIT \_\_\_\_\_

THIS PROGRAM SHOULD BE JUDGED IN THE FOLLOWING CATEGORY (CHECK ONLY ONE):

- COMMUNITY ACTION—Programs that address a specific need in the local community
- EDUCATIONAL ADVENTURES—Programs that teach Girls a specific skill as part of the GSLE through the National Program Portfolio
- SPECIAL CELEBRATIONS—Programs that are focused on recruitment and/or retention of Girls and Adults as part of the GSLE through the National Program Portfolio
- SCOUT SPIRIT—Programs based on the Girl Scout Promise and Law

Name of Event:

\_\_\_\_\_

Describe a specific impact this Program

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

How did the Program represent the above chosen category:

\_\_\_\_\_  
\_\_\_\_\_

Date \_\_\_\_\_ Site \_\_\_\_\_ Time \_\_\_\_\_

Number of Participants \_\_\_\_\_ Cost per Person \_\_\_\_\_

What did the cost include?

\_\_\_\_\_  
\_\_\_\_\_

Program Coordinator \_\_\_\_\_ Email \_\_\_\_\_ Phone # \_\_\_\_\_

Troop Leader \_\_\_\_\_ Email \_\_\_\_\_ Phone # \_\_\_\_\_

**A PICTURE THAT DEMONSTRATES THE EXCITEMENT, INTENSITY OR SPIRIT OF THE PROGRAM MUST BE INCLUDED FOR APPLICATION TO BE CONSIDERED. Please use additional pages if necessary.**