Girl Scouts of Eastern South Carolina

**SUPPLEMENTAL MONEY-EARNING PERMISSION REQUEST – Gold Award**

**This form is to be used when a Senior or Ambassador Girl Scout plans a supplemental money-earning project to help finance a Gold Award project. All request forms should be submitted to Council a minimum of four weeks prior to the project. Please submit forms to Pat Baxley** **patbaxley@girlscoutsesc.org**

**Troop# Program Age Level: Senior Ambassador**

**Date:**

**Girl Scout’s Name:**

**Street Address: City: Zip:**

**Telephone # ( ) Email:**

**Describe the Award project for which additional funds are needed:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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**In-Kind Donations Received:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Proposed Money Earning Project: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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**Proposed Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**1. PROJECTED AWARD PROJECT INCOME**

**2. PROJECTED AWARD PROJECT EXPENSES**

**Specific Expenses - Describe Estimated Expenses**

|  |  |
| --- | --- |
| **Income Activity Estimated Income****$** | **Actual Income****$** |
| **$** | **$** |
| **$** | **$** |
| **$** | **$** |
| **$** | **$** |
| **$** | **$** |
| **TOTALS $** | **$** |
|  |

 **$**

 **$**

 **$**

 **$**

 **$**

 **$**

**Total $**

**We have read and agree to the Girl Scouts of Eastern South Carolina and GSUSA policies and standards in** Volunteer Essentials, **(Chapter 5 Managing Group Finances). We have discussed our money-earning activity plan with the parents/guardians in our troop and have secured their support for this activity, if applicable.**

**Individual Girl Signature Date Troop/Volunteer Adult Signature Date**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **Position\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**FOR COUNCIL USE**

**Money-Earning Project Approved Money-Earning Project Not-Approved Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**If not approved, the reasons are \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Staff Reviewed:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**GSESC 7/18/2020**