



Girl Scouts of the Missouri Heartland, Inc.
**Volunteer Development
 Financial Assistance**

Please complete this form in its entirety and attach it to the Training Registration Form. Forms must be received no later than the training registration deadline. For complete financial assistance guidelines, please visit www.girlscoutsmoheartland.org.

Request for:

Name _____ Address _____

City _____ County _____ State _____ Zip _____

Phone _____ E-mail _____

Girl Scout Affiliation (check all that apply)

- Leader or Co-Leader of Troop Number _____
- Registered Adult
- Service Team Member
 Service Unit Number: _____
 Position: _____
- Facilitator
- Other _____

Program Age Level

- Girl Scout Daisy (grades K-1)
- Girl Scout Brownie (grades 2-3)
- Girl Scout Junior (grades 4-5)
- Girl Scout Cadette (grades 6-8)
- Girl Scout Senior (grades 9-10)
- Girl Scout Ambassador (grades 11-12)

Assistance Type

- Volunteer Development Training
 Name of Training: _____
 Date of Training: _____

Amount Required/Fees

\$ _____

Amount Requested

\$ _____

Reason(s) for Financial Need

- Annual Household Income: \$0 - \$20,000 \$20,001 - \$30,000 \$30,001 - \$40,000
 \$40,001 - \$50,000 \$50,001 - \$60,000 \$60,001 and up

Number of Household Members: _____ Other pertinent information: _____

Requested by (if different than individual listed above):

Name _____ Relationship to individual listed above _____

Daytime Phone Number _____ E-mail _____

For Office Use Only: Approved Denied Reason for Denial _____
 Amount Approved \$ _____ Date Approved _____ Account # _____ Reg. Packet # _____
 Official Council Signature _____

Girl Scouts of the Missouri Heartland, Inc.

877-312-4764 • www.girlscoutsmoheartland.org • gscouts@girlscoutsmoheartland.org

