



MONEY EARNING APPLICATION

- Money earning for disaster relief is allowed only when the GSUSA, with the approval of the Board of Directors, has suspended the GSUSA policy restricting money earning for other organizations
- Request for money-earning projects must be submitted at least **one month** in advance to the Member Support Specialist.
- Daisy troops may not participate in any money-earning projects beyond the Fall Product Program and the Girl Scout Cookie Program.
- All troops/groups/girls requesting permission to hold money-earning activities must fulfill the participate requirements during the Fall Product Program and the Girl Scout Cookie Program.
 - Participation in the Fall Product Program: Troops/groups must have at least 25% of registered girls participate and achieve a \$150 **troop/group** total. For example, a troop of 10 registered girls must have at least 3 girls sell an average of \$50 each to have a troop total of \$150. If all 10 registered girls participate, they would each need to sell an average of \$15 to achieve the \$150 troop total.
 - Participation in the Girl Scout Cookie Program: Troops/groups must have at least 50% of registered girls participate and achieve at least a 180 box **troop/group** total. For example, a troop of 10 registered girls must have at least 5 girls sell an average of 36 boxes each to reach 180 boxes. If all 10 registered girls participate, they would each need to sell an average of 18 boxes each.
- Send form to Girl Scouts of Northern Illinois via email: customercare@girlscoutsni.org

Troop # Service Unit Name and # Level

Application Submitted By

Address City State Zip

Phone E-mail

1. Has the troop or girl done the following:
 - a) Set Goals
 - b) Budgeted
 - c) Consulted our *Safety Activity Checkpoints & Volunteer Essentials* (Chapter 5, Managing Troop/Group Finances) **NOTE:** When conducting money-earning activities, troops/girls should have an emergency plan that includes the GSNI Emergency Card and a first-aid kit. www.girlscoutsni.org
 - d) Participated in the Fall Product Program
 - e) Participated in the Girl Scout Cookie Program

2. Please give a description of the money-earning activity.

3. Date of money-earning activity:

4. Location of money-earning activity:

- a) Name of location:
- b) Address of location:

5. What will the proceeds from this money earning activity be used for, please be specific.

6. Please list the skills the girls will learn from their participation in this project.

Applicant Signature

Girl Representative Signature

For Office Use Only

Approved Approved Under the Following Conditions _____

Denied Reasons for Denial _____

Member Support Specialist's Signature _____ Date _____

Original to Member Support Specialist - Copy to Fund Development - Return Copy to Requester