



Money-Earning Project Application

This form MUST be submitted to **Customer Care at: customercare@citrus-gs.org** at least 60 days in advance for each proposed Money Earning Project

Guidelines:

- Dues, Donations and Product Program Participation are the primary source of income for troops
- Troops/Groups must be in good financial standing with a current finance report submitted
- Project may not conflict with Girl Scouts of Citrus Council product program dates
- Review guidelines for Money-Earning in the Volunteer Essentials guide
- Entering into a contract or agreement with any business, organization, or agency, on behalf of GSC, requires approval from the CEO or CEO designee, and then must be included with the application.

Send request to **Customer Care at: customercare@citrus-gs.org** with subject title Money Earning Application for council approval. The co-leader, your Community Team Leads and you will be notified via email with application status within 20 business days.

Troop/Group # _____ Service Community _____ Program Level D B J C S A # of Girls _____

Co-Leader's Name: _____ Home Phone _____ Cell Phone _____

Address: _____ City: _____ Zip: _____

E-Mail _____

Participation Checklist:

- Date of most recent Finance Report
- Participated in last Fall Product Sale Yes No
- Participated in last Cookie Sale Yes No
 - New troop – will participate in next Product Sale Yes No
- Had other Money Earning Projects this year Yes No
 - Please List:

Amount to be earned: \$ _____

Additional Funds needed for (Be specific, activity must relate to Girl Scout Leadership Experience GSLE)

Proposed Money Earning Project

Money-Earning Project and Description: _____

Date of Project: _____ Location: _____

Supplies Required: _____

Budget for Supplies: _____

Donated Supplies: _____

What role will girls play in project? _____

What skills, knowledge, etc. will the girls gain? _____

AGREEMENT

We understand that this is a request for approval and we will not make final arrangements for this money-earning project until we have received council approval. We have read and agree to follow Girl Scouts of Citrus Council and Girl Scouts of the USA policies, standards and procedures. We will complete all necessary forms and return them at the appropriate time. If during this planning process, significant changes occur in the information on this application, we will notify the VP of Membership and Volunteer Engagement by emailing Customer Care at: customercare@citrus-gs.org

Girl Member Signature: _____ Date: _____

Co-Leader Signature: _____ Date: _____

GSC Approval Yes No Signature: _____ Date: _____

Explain if Denied: _____



Money Earning Project Final Report

Troop # _____ Service Community _____ Program Age Level _____ # Registered girls _____

Co - Leader's Name: _____ Contact Number _____

Address: _____ City: _____ Zip: _____

E-Mail _____

Description of Money-Earning Project:

Date of Project: _____ Location: _____

Amount of income \$ _____

Amount of expenses \$ _____

Amount of profit \$ _____

How did the girls benefit from this project (skills, values, knowledge)?

Was the project suitable to the girls' ages and abilities? Explain why or why not?

What problems (if any) did the troop encounter?

What recommendations would you make to other troops planning a similar project?

If you made more than you needed, what will the troop do with the extra money?

Signature of Co - Leader: _____ Date: _____

Signature of Girl Member: _____ Date: _____

Submit this form to Customer Care at customer care@citrus-gs.org within 30 days after the project has been completed.



Parent Permission For Troop Money-Earning Project

All Girl Scouts participating in a Money Earning Project must have a copy of this form on file with the troop.

My Girl Scout, _____, who is a member of Girl Scout Troop/Group # _____ has my permission to participate in the following troop money earning project(s).

Please list the purpose of the additional money earning project:

Please list and check off which projects they are participating in:

- Yes No Project _____ Date(s) _____
- Yes No Project _____ Date(s) _____
- Yes No Project _____ Date(s) _____

As the parent of, _____ I agree to accept the responsibility for all products and money she receives and will see that she always has adult guidance. I understand that all money earned in the name of the Girl Scout troop belongs to the troop and is not individual funds.

Signature of Parent/Guardian _____ Phone No. _____

Address _____ City _____ Zip _____ Date _____