



INTERNATIONAL TRIP APPLICATION FORM
Guider

Event applying for: _____

Part A. Personal Information

Name: Last name First name
Birth date: year/month/date iMIS number:
Address: No. Street Apt. No. P.O. Box or R. R. No.
City Province/Territory Postal Code
Phone: Home () Business ()
Email address:
Area/Community of Guiding:
Number of years of uninterrupted membership:

Part B. Participant Agreement

I understand that by submitting this application and if selected, GGC will be making a significant financial contribution for my participation in this event. In light of that:

- a. I will prepare for this international experience as required.
b. I will positively represent Girl Guides of Canada-Guides du Canada to all persons I meet throughout this international experience.
c. I understand that I will be expected to share my experiences within GGC, as may be further specified, upon my return to Canada.
d. I agree to be an active Member of GGC for a minimum of one year following the trip. If I do not do so, I agree that I will reimburse GGC for 50% of the actual subsidy for this event.
e. I will adhere to the roles and responsibilities expected of the event's Guiders.
f. I agree to all the items outlined on the General Qualification Guidelines for International Events.

Applicant's name Applicant's signature Date

Note: In order that as many Members as possible have the opportunity to participate in nationally sponsored international events, Members selected may participate in these events only once as an adult.

Part C. Guarantee of Financial Responsibility

I understand that I am required to cover any incidental costs that occur over and above the trip fees covered by the Girl Guides of Canada-Guides du Canada. I guarantee financial responsibility over and above that provided Girl Guides of Canada-Guides du Canada. I understand that I am not permitted to fundraise to cover these costs.

Name Signature Date



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Part D. Referees

Please provide the name and contact information for your two referees

Within Guiding:

Name: _____

Last name

First name

Phone: () _____ Email: _____

Outside of Guiding:

Name: _____

Last name

First name

Phone: () _____ Email: _____

Part E. Self Evaluation

*Please answer honestly how true each of the following statements is for you:
(Check only one box per line)*

	Not like me at all	Somewhat like me	Very much like me	Exactly like me
I adapt easily to different situations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I am a leader	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I collaborate well	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I get along well with others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I am a good problem solver	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I am considerate of others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I feel comfortable supervising a large group of girls	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I am reliable	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I am tolerant of people's differences	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I am open to new situations and ideas	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I like to be challenged	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I am active	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I deal well with changes in plans	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I am knowledgeable about Girl Guides of Canada	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I am knowledgeable about the World Association of Girl Guides and Girl Scouts (WAGGGS)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



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Part F. Relevant Experience

1. Do you have experience supervising a group of adolescents? Yes No

If yes, please describe: _____

2. Do you have experience supervising a group of adolescents overnight? Yes No

If yes, please list experience(s) below, in order of length, beginning with the longest.

Destination: _____

Your Role: _____

Group Size: _____ Length of trip: _____

Destination: _____

Your Role: _____

Group Size: _____ Length of trip: _____

3. Do you meet all the physical requirements of the particular trip you are applying for that are listed on the fact sheet? (e.g. ability to hike, swim, etc.) Yes No

Please give examples of how you meet the requirements:

4. If Camping is involved, please answer the following:

Do you have camping experience? Yes No

What types of camps have you attended?

What is the length of the longest camp you attended?

What specialized skills have you gained from camps you attended?



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Part G. Trip Interest

In 600 words or less, explain:

- Why this trip in particular interests you
- Why you would be a great trip Leader
- What specific knowledge and skills you would bring to the group
- What you expect to learn from this experience
- How you can use the experience to enhance the Guiding program

Use a separate sheet if necessary