



Destination Scholarship Application

First Name	<input type="text"/>	Last Name	<input type="text"/>
Email Address	<input type="text"/>	Confirm Email Address	<input type="text"/>
Address	<input type="text"/>		
State	<input type="text"/>	Zip Code	<input type="text"/>
Troop Number	<input type="text"/>	Girl Scout Council	<input type="text"/>
Name of Destination	<input type="text"/>		
Date of Destination	<input type="text"/>		
Parent/Guardian First Name	<input type="text"/>	Last Name	<input type="text"/>
Parent/Guardian Email	<input type="text"/>		
Confirm Parent/Guardian Email	<input type="text"/>		

How would this scholarship help you?

Please complete and email this form to d2@girlscoutsla.org

