

# Self Study Video Request

Please provide all of the information requested and fax Equivalency Request to 651-227-7533 or mail to: Girl Scout Council of St. Croix Valley, 400 Robert Street South, St. Paul, MN 55107. If you have any questions please call 651-227-8835, 800-845-0787, or visit our Web site at [www.girlscoutscv.org](http://www.girlscoutscv.org). See the Council Guide for details on Independent Home Study.

|  |                     |
|--|---------------------|
| Name:  | Date:               |
| Address:   | Home Phone: (     ) |
| City/State/Zip:  | Work Phone: (     ) |
| E-mail Address:  | Troop/Group #:      |
| Service Unit:  |                     |
| I am requesting: <input type="checkbox"/> Basic Leadership <input type="checkbox"/> Daisy Girl Scout Program Age Level <input type="checkbox"/> Brownie Girl Scout Program Age Level<br><input type="checkbox"/> Junior Girl Scout Program Age Level <input type="checkbox"/> STUDIO 2B Level Training <input type="checkbox"/> Troop House Training |                     |

Please return the video to the council office within two weeks so other volunteers may use it.

|                        |                      |                      |
|------------------------|----------------------|----------------------|
| <b>Office Use Only</b> | Date Video Mailed:   | Video Number:        |
|                        | Date Video Due Back: | Date Video Returned: |

