

Girl Scouts of Eastern Pennsylvania

Girl Scout Silver Award Take Action Project Proposal

Please fill out using a word processing program, type or print in black ink. Proposals which are incomplete or written in pencil will be returned. Make copies for your Girl Scout Silver Award Project Advisor, your Troop Leader and for you to keep. Submit original to the Lehigh Valley Service Center 4 weeks prior to when you want to start your project. Do not begin your project until you have received Council approval, and you have a signed agreement letter detailing any changes to this form.

For Council use only

Received by Council on: _____ Reviewed by committee on: _____

Name: _____ Service Unit: _____

Address: _____ County: _____

City: _____ State: _____ 9-Digit Zip code: _____

E-mail: _____ Phone: _____

Age: _____ Grade: _____ Graduation Year: _____ School: _____

Troop/Group Number: _____ Troop/Group Leader: _____

Address: _____

City: _____ State: _____ Zip: _____

Troop/Group Leaders Phone: (____) _____ E-mail: _____

Girl Scout Silver Award Project Advisor: _____

Address _____

City _____ State _____ Zip Code _____

Project Advisor's Organization: _____

Project Advisor's Phone: (____) _____ E-mail: _____

Prerequisites: EARN ONE CADETTE JOURNEY.

List the Journey that you have completed along with your troop/group volunteer’s signature.

Cadette Journey Book	Date Completed	Troop/Group Volunteer’s Signature
1.		

Please attach the answers to the below questions relative to the Journey Book you earned. Please attach responses on a separate typed document.

It’s Your World – Change It! Amaze

1. List 3 challenges you completed for the Interact Award.
2. Describe the relationship issue you addressed in your Take Action Plan for the Diplomat Award.
3. Name two important tools in your Peacemaker Kit and tell why you think they are important. (Peacemaker Award)

It’s Your Planet – Love It! Breathe

1. What are at least two observations about air that you made for your journal for the Aware Award?
2. What Take Action Plan about caring for the air did you carry out for the Alert Award?
3. What affirmation did you make for the future for the Affirm award?

It’s Your Story – Tell It! Media

1. List three activities that you did for the Monitor Award and what you accomplished by doing each activity.
2. Write a paragraph that describes the Take Action Project your team did to change media for the better through a Media Remake.
3. What personal Media commitment did you make for the Cultivate Award?

Girl Scout Bronze Award Completion Date (month/year). If earned through a different GS Council, list name of Council.	
Describe your Bronze Award Project.	

_____ (Month/Year) I read the GSUSA Silver Award packet & the GSEP Silver Award Resource Manual

_____ (Month/Year) I attended a Silver Award Take Action Workshop

Silver Award Take Action Project

Project Title: _____

Proposed Start Date: _____ Proposed Completion Date: _____

List the full name and address of the sites/organizations (beneficiary) which will benefit from your project. If you plan to provide the program to more than one site, attach a sheet with additional agency names and addresses.

Name of Project Beneficiary: _____

Beneficiary's Address: _____

City _____ State _____ Zip Code _____

A. Describe the issue your project will address. Remember your 15-second pitch.

1. Who will benefit from the project? Who is your audience? How many people will be served (if applicable)?
2. What type of program/service will you provide? What do you hope to achieve? Describe in detail.
3. When will the program or service be offered? Give estimated dates.
4. Where will the program or service be offered? If same as above, indicate as "Same". If there is more than one site, list all.

B. Discuss your reasons for selecting this project.

C. Outline the strengths, talents, and skills that you plan to put into action. What skills do you hope to develop?

D. Describe the steps involved in putting your plan into action, including resources, facilities, equipment, and approvals needed. **Complete Timeline attached to the end of the proposal or found in the Award Manual Appendix.** Please estimate the time for each project task/activity. **You must include the leadership hours needed to recruit, train and supervise your team of volunteers. Then total the estimated hours to show how you plan to earn the minimum 50 project hours.**

E. Describe how you will accomplish the leadership component of the Silver Award Project. Tell us how you will recruit, train and supervise three or more volunteers (other than family members) to assist you with this project. You must build at least 7 hours of leadership into your project where you lead others who are helping you deliver/provide the program to others. In addition, please list your volunteers in the chart below.

F. Your Resource Team - List the names of consultants and organizations that you plan to work with on your Take Action project. This is a preliminary list that may grow through the course of your project

Name	Title of Organization	Technical Knowledge/Role in your project

G. Your Volunteer Team - List the names of three or more non-related volunteers who you plan to use to complete your project. Include full names, titles and organizations, if applicable. Also list their relationship to you, if applicable (i.e. parent, sibling, Girl Scout leader, teacher, friend, coach, etc.). Relatives may assist you with the project, but are not considered a part of the core volunteer team.

Name	Relationship to you	Describe how they will assist you

H. Budget - Estimate overall project expenses and how you plan to meet these costs. All supplies needed to complete the project must be listed. Indicate if you plan to have any supplies donated. Contact the Older Girl Program Manager for the GSEP Solicitation Letter to seek supplies from businesses. **This section must be completed by every applicant, even if the benefactor covers the project expenses or you don't need to purchase supplies.**

Materials description	Cost	Donated/Paid by
Total Expenses	\$	

I. How will your project be sustained beyond your involvement? See toolkit for sustainability tips.

J. Indicate methods and/or tools you will utilize to evaluate the effectiveness of your project. You must create and distribute evaluation forms to all volunteers, participants and project advisors.

K. Describe how you plan to tell others about your project, the project's impact, and what you have learned (Web site, blog, presentations, posters, videos, articles, and so on).

L. Answer the questions in the chart below.

Impact On . . .	Goals	Examples of Immediate Impact	Possible Future Impact
Community	What community issue will be addressed?	What are concrete examples of ways you plan to make a difference?	What examples of the project impact might you see in future?

Target Audience (workshop participants, other youth, community members, and so on)	What skills, knowledge, or attitudes will your target audience gain?	What examples demonstrate ways that the target audience will gain skills or knowledge?	What would be examples of a long-term impact on your target audience?
--	--	--	---

M. The following is a list of the 15 Girl Scout Leadership Outcomes.

* Which do you think you will develop throughout this project process?

Discover:

- I will develop a stronger sense of self.
- I will develop positive values.
- I will gain practical life skills.
- I will seek challenges in the world.
- I will develop critical thinking.

Connect:

- I will develop healthy relationships.
- I will promote cooperation and team building.
- I will resolve conflicts.
- I will advance diversity in a multicultural world.
- I will feel more connected to my community, locally and globally.

Take Action:

- I will identify community issues.
- I will be a resourceful problem solver.
- I will advocate for myself and others, locally and globally.
- I will educate and inspire others to act.
- I will feel empowered to make a difference in the world.

Your Signature: _____ Date: _____

Leader's Signature: _____ Date: _____

Project Advisor's Signature: _____ Date: _____

Please Note: Your Project Advisor must be an adult with expertise related to your project and cannot be your troop leader or relative.

Applicant's racial background is: (please check as many as apply)

African American American Indian Asian Caucasian
 Hawaiian or Pacific Islander Other (please specify: _____)

Applicant's ethnic background is: (please check one)

Hispanic or Latina Non-Hispanic or Latina

