

GIRL SCOUT GOLD AWARD FINAL REPORT

Please fill out using a word processing program, or type or print in black ink. Make copies for your Girl Scout Gold Award Project Advisor and for you to keep. SUBMIT ORIGINAL REPORT TO YOUR COUNCIL. Reports written in pencil or illegible will be returned.

Name: _____
(Print your name the way you want it to appear on your Gold Award certificates. Please include your middle initial.)

Phonetic spelling of your name for the ceremony: _____

Address: _____ County: _____

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

Home Phone: _____ Cell Phone: _____ E-Mail: _____

Troop # _____ Service Unit Name: _____ Service Unit #: _____

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

Troop/Group Advisor's Name: _____ Troop/Group Number: _____

Troop/Group Advisor's Phone: (_____) _____ Email: _____

Girl Scout Gold Award Project Advisor: _____

Project Advisor's Phone: (_____) _____ Email: _____

Title of Project: _____

List the full name and address of the Site/Organization which benefitted from your Gold Award project:

Site Name _____

Full Address: _____

STEP 6: Tracking Project Hours

Date started (month/year): ____/____ Date Completed (month/year): ____/____

How many hours did you invest in the project? _____ How many hours did your volunteers invest in the project? _____

STEP 7: Reflection and Evaluation

A. Briefly summarize your project.

Include the issue your project addressed and the methods you used for meeting the project objectives. Describe the Who, What, When, Where and Why. Please limit your summary to one paragraph.

B. Discuss the benefits your project provided to others in the community.

C. Describe how you achieved the seven hours of leadership. How did you work with your team of volunteers?

D. Write a brief summary of the evaluation forms you received from your volunteers, participants and project advisor.

E. What did you learn about yourself as a result of this project?

F. What aspects of your project would you change or do differently?

G. What was the most successful aspect of your project?

H. Attach the following items to the Final Report:

- 1. Timeline of the 65 project hours
- 2. Final budget
- 3. List of volunteers who assisted you, the dates and hours they volunteered, and their titles/ positions (i.e. teacher, coach, Girl Scout leader, friend, relative, etc.)

Your Signature _____ Date: _____

Gold Award Project Advisor's Name (please print): _____

Gold Award Project Advisor's Signature _____ Date: _____

Gold Award 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

FOR COUNCIL USE ONLY

DATE RECEIVED BY COUNCIL: _____

DATE OF FINAL PRESENTATION: _____

DATE APPROVED BY Gold AWARD COMMITTEE: _____

COUNCIL REPRESENTATIVE SIGNATURE: _____

GO FOR IT: THE GIRL SCOUT GOLD AWARD PYRAMID

