

GIRL SCOUTS OF MISSOURI

Making *CENTS* Patch Program Evaluation

This evaluation must be completed by the Girl Scouts and the leader/advisor to purchase awards for this program. Please return this form to your Girl Scout Shop at the time of purchase. If you mail your award order, please include this evaluation. You may also complete this form online at www.girlscoutsem.org/research/surveys.asp. When you purchase the awards, provide the date you completed the online form.

Please indicate the number and Program Age Level of the girls participating.

D ___ B ___ J ___ C ___ S ___ A ___

Your Council name: _____

Record the total numbers for each question. For open-ended questions, please record each answer and the number of girls giving that answer.

All Girl Scouts answer these questions.

1. Did you enjoy these program activities? Yes ___ No ___
2. Are you more aware of how saving can help you reach a goal? Yes ___ No ___
3. Did you learn about some factors that can help you make choices when you spend money? Yes ___ No ___
4. Check the activities you completed.

Girl Scout Daisies and Brownies

- | | | |
|---|--|---|
| <input type="checkbox"/> 1. Coins and Bills | <input type="checkbox"/> 5. Shopping for Toys | <input type="checkbox"/> 9. Story Time |
| <input type="checkbox"/> 2. Counting Game | <input type="checkbox"/> 6. Spending Plan Containers | <input type="checkbox"/> 10. Spending Plan Game |
| <input type="checkbox"/> 3. Shopping for Snacks | <input type="checkbox"/> 7. Spending Plan Envelopes | <input type="checkbox"/> 11. Field Trip |
| <input type="checkbox"/> 4. Grocery Store | <input type="checkbox"/> 8. Financial Goals Poster | <input type="checkbox"/> 12. Generic Items |

Girl Scout Juniors

- | | | |
|--|--|--|
| <input type="checkbox"/> 1. Needs v. Wants | <input type="checkbox"/> 5. Reading Skills | <input type="checkbox"/> 9. Investments |
| <input type="checkbox"/> 2. Advertising | <input type="checkbox"/> 6. Spending Diary | <input type="checkbox"/> 10. Money Facts |
| <input type="checkbox"/> 3. Saving | <input type="checkbox"/> 7. Spending Plans | |
| <input type="checkbox"/> 4. Board Game | <input type="checkbox"/> 8. Field Trip | |

Girl Scout Cadettes, Seniors and Ambassadors

- | | |
|--|---|
| <input type="checkbox"/> 1. Checking Account/Debit/ATM Cards | <input type="checkbox"/> 7. Loan Basics |
| <input type="checkbox"/> 2. Credit Score/Credit Rating/Credit Card | <input type="checkbox"/> 8. Budget/Personal Finance |
| <input type="checkbox"/> 3. Identity Theft | <input type="checkbox"/> 9. Stock Market |
| <input type="checkbox"/> 4. Bank/Finance Company/Credit Union | <input type="checkbox"/> 10. Junior Achievement Trip |
| <input type="checkbox"/> 5. Federal Reserve Trip/Speaker | <input type="checkbox"/> 11. Job/Paycheck/Taxes/Careers |
| <input type="checkbox"/> 6. Bank Trip/Speaker | <input type="checkbox"/> 12. Teaching Another Troop |
| | <input type="checkbox"/> 13. Presentation |

5. What was your favorite activity? _____

6. Which activity did you not like? _____

7. What other activities could be added to help girls become financially literate?

For Girl Scout Daisies and Brownies

- 1. Can you tell someone about how much each coin is worth? Yes__ No__
- 2. Did spending play money help you learn how to make change? Yes__ No__
- 3. What's changed in the way you think about money?

For Girl Scout Juniors

- 1. Did the program activities help you understand the difference between needs and wants? Yes__ No__
- 2. Did the activities help you determine what is important to you when you make a choice? Yes__ No__
- 3. Are you more aware how your choices can help you reach a goal? Yes__ No__
- 4. Are you more aware of your options for saving money? Yes__ No__
- 5. How have these activities changed the ways you use/save/spend money?

For Girl Scout Cadettes, Seniors and Ambassadors

- 1. Are you using the information you learned in this program in your personal financial plans? Yes__ No__
- 2. Did these activities help you explore your goals? Yes__ No__
- 3. Do you have a financial plan in place to help you reach a goal? Yes__ No__
- 4. Do you feel better equipped to manage your personal finances now? Yes__ No__
- 5. What is the most important information this program provides to girls like you? _____

- 6. How has this program changed how you manage your personal finances? _____

For Adults with the Troop

- 1. Would you recommend this patch program to another troop? Yes__ No__
- 2. Will this troop participate in this patch program again? Yes__ No__
- 3. Have you seen changes in how the girls in your troop regard money? Yes__ No__
If yes, please give one or two examples. _____

- 4. Are the girls in this troop more involved in troop finance management? Yes__ No__
If yes, are the girls more involved in financial decision-making? Yes__ No__
If yes, are they showing greater ability to make good decisions? Yes__ No__

Comments: _____
