

Girl Scout Silver Award Final Report – Journeys

Please type or print in black ink. Make copies for your Girl Scout Silver Award Project Advisor and for you to keep. Submit the original to the council office. **This form must be completed by each girl and is due upon completion of all 6 steps.**

Nov. 2009

Name: _____ Date: _____

Street Address: _____

City, State & Zip: _____

Phone: _____ Email: _____

Age: _____ Grade: _____ School: _____

Troop/Group Advisor: _____ Troop/Group Number: _____

Troop/Group Advisor's Address: _____

Troop/Group Advisor's Phone: _____

Troop/Group Advisor's Email: _____

Did you do your project by yourself or with others? _____

Names of other team members: _____, _____

STEP 1: GET READY

Girl Scout Silver Award Project Advisor: _____
(Can be your Troop Advisor)

Project Advisor's Phone: _____ Email: _____

Attach copy of timeline developed by you and your advisor.

STEP 2: CADETTE JOURNEY

Activities	Date Completed	Advisor's Signature
1. Which Cadette Journey did you complete? Journey:		
2. Briefly describe the Take Action Project you did to complete this Journey:		

STEP 3: GIRL SCOUT SILVER AWARD PROJECT

Title of Project: _____

Start Date: _____ Completion Date: _____

A. Describe the issue your project addressed.

B. What was the cause of the issue?

C. Discuss the reasons for selecting this project. What need will it address a need in your community?

D. Describe the steps involved for putting your plan into action, including facilities and/or equipment needed. (You can attach project plan.)

E. Who did you partner with in your community and what resources did you use?

F. Overall project expenses and how you met these costs (attach a copy of your budget).

STEP 4: REFLECTION

A. Which of your leadership skills, strengths and talents did you use to complete the Silver Award project?

B. What impact did your project have in your community? How did you evaluate the effectiveness of your project?

C. How will your project be sustained in the community for the future?

STEP 5: APPROVAL BY ADVISOR

Your Printed Name: _____

Your Signature: _____ Date: _____

Project Advisor's Signature: _____

ACTIONS:	DATE:
Approved by Girl Scout Project Advisor:	
Awarded Girl Scout Silver Award:	

Submit this form to: Girl and Teen Specialist
Girl Scouts of NE Kansas & NW Missouri
8383 Blue Parkway
Kansas City, MO 64133

Questions: Carol Solenberger, Teen Specialist, at 816-358-8755 x 3017 or CarolSolenberger@girlscoutsksmo.org.