



Girl Scout Silver Award Final Report

Send To:

**Manager, Girl Leadership Experience, Partnerships and Girl Awards
Girl Scouts of South Carolina – Mountains to Midlands, Inc Five
Independence Pointe, Suite 120
Greenville, SC 29615
girlawards@gssc-mm.org**

Please type. Make a copy for your Girl Scout Silver Award Project Advisor and for yourself. Submit original to Manager, Girl Leadership Experience, Partnerships and Girl Awards, Girl Scouts of South Carolina – Mountains to Midlands.

Silver Award Final Reports need to be submitted by April 1st to be honored at the May ceremony.

Contact Information

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

E – Mail: _____ Phone: _____

Age: _____ Grade: _____ School: _____

Troop/Group Volunteer: _____ Troop/Group Number: _____

Troop/Group Volunteer's Phone: (____) _____ E-Mail: _____

GO ON A CADETTE JOURNEY

Check Completed Journey

_____ It's Your World - Change it! *aMAZE!*

_____ It's Your Planet - Love it! *Breathe*

_____ It's Your Story – Tell It! *MEdia*

BUILD YOUR SILVER AWARD PROJECT TEAM

Circle Team Model

☐ Solo Model
List Others You Involved:

☐ Small Team Model
Team Members:

GIRL SCOUT SILVER AWARD PROJECT

Title of Take Action Project:

Start date:

Completion date:

A. Describe the issue your Take Action project addressed.

B. What did you discover about yourself?

C. How did you connect with your local and global communities?

D. What skills did you gain? (such as public speaking, team building, advocacy)

E. What impact did your Take Action Project have on your community?

F. How did you live out the Girl Scout Promise and Law?

G. How did you share and celebrate your success with others?

Your Signature: _____ **Date:** _____

Project Advisor's Signature: _____

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