

## Silver Award Take Action Project | Checklist for Completion and Submission

Please note: Each girl earning her Silver Award should submit an individual Final Report.

#### **Pre-Project:**

- Confirm all group members are registered Girl Scout Cadettes in sixth, seventh, or eighth grade
- Complete Cadette Journey
- Complete Journey Take Action Project

#### **Project:**

- Build team, including community partners to work with
- Define issue for Take Action Project to address
- Meet criteria for Take Action Projects (i.e. not a collection and/or donation)
- Contribute the recommended minimum of 50 hours for <u>each</u> girl
- Submit an individual Final Report detailing the unique experience for <u>each</u> girl
- Submit an individual Time Log detailing the 50 hours for <u>each</u> girl
- Submit project to council as one complete packet (all Final Reports, Time Logs, receipts, photos, etc.) by September 30 of ninth grade year

#### **Post-Project:**

- Send pictures to the GSMIDTN Communications Department (CommunicationsDept@gsmidtn.org) Date Completed: \_\_\_\_\_
- $\Box$  Receive email from council that Final Reports have been received

Date Completed: \_\_\_\_\_

- Receive email from council that Final Reports have been approved
  Date Completed: \_\_\_\_\_\_
- Send thank you notes to community partners and others who work with girls

- Receive email with details for the upcoming Highest Award Ceremony
- Celebrate!





Your Name:\_\_\_\_\_

# Silver Award Take Action Project | Cover Sheet and Request for Additional Information

Please note: Each girl earning her Silver Award should submit an individual Final Report.

Name:			
Address:			
City:		State:	Zip Code:
Email:		Phone:	
Age: Grade:	School:		
Title of Silver Award Project:			
Primary Focus Area:	Civic Engagement	☐ Healthy Living	☐ Financial Literacy
	STEAM (Science, Tec	hnology, Engineering, A	rts, and Math)
Girl Scout Silver Award will be	earned as: 🛛 Indivi	dual 🛛 🗌 Group (m	ax. 4)
Parent/Guardian Names:			
Troop/Group Number:	Troop/Group Vo	lunteer:	
Troop/Group Volunteer Phone: Email:			
Girl Scout Silver Award Project	Advisor:		
Project Advisor Organization: _			
Project Advisor Phone: Email:			





Your Name:\_\_\_\_\_

Group Member Names (if applicable)	Grade
1.	
2.	
3.	
4.	

Adult Names	Relationship (adult, leader, parent, etc.)

List the names of individuals and organizations that worked with on your Take Action Project.

Team Members	Affiliation	Role





Your Name: \_\_\_\_\_

#### **Take Action Project Description**

Describe your Silver Award Take Action Project in 75 words or less. Be sure to include at least one of these key points: what you did to address your issue, who/how it will be sustainable, the national or global link(s), and how you spread the word about your project.

#### **Take Action Project Photos**

Be sure to take four to six digital photos of your project before, during, and/or after to submit with your final report. All photos should be high-quality, clear photos with no text or Photoshop effects.

#### **Take Action Project**

Project Title: \_\_\_\_\_

Start Date: \_\_\_\_\_\_ Completion Date: \_\_\_\_\_\_ Hours: \_\_\_\_\_

Describe the issue your project addressed, what impact you had hoped to make, and who benefited.

.....

What was the root cause of the issue? How did you address it?

How will your project be sustained beyond your involvement?



Girl Scout Silver Award | Final Report

Your Name: \_\_\_\_\_

Explain the national and/or global link to your project.

Describe what steps you took to inspire others through sharing your project (website, blog, presentations, posters, videos, articles, and so on).

Describe what you learned from this project, including leadership skills you developed. What did you learn about yourself as a result of this project?

What was the most successful aspect of your project?

What did you learn from others who worked to solve the same problem? How did that help you make your project better?

What do you know now that you didn't know before?





Your Name: \_\_\_\_\_

# By signing below, we (girl, project advisor, parent/guardian, and troop leader/volunteer) agree and understand that the Girl Scout Silver Award Take Action Project:

- It cannot solely benefit the Girl Scout community
- It cannot just a collection or donation drive
- It cannot be a fundraiser for another organization
- It is not simply volunteering time for another organization in an already existing project

Girl Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Project Advisor Signature: \_\_\_\_\_ Date: \_\_\_\_\_

I, **Girl Scout Troop Leader/Volunteer**, have reviewed the above Girl Scout Silver Award Project Final Report including answers to the Take Action Project questions. I am aware of the requirements and guidelines of the Girl Scout Silver Award set forth by both GSUSA and Girl Scouts of Middle Tennessee, and believe that this project aligns with those requirements.

Troop Leader/Volunteer Signature:	Date:

Completion Date: _	Final Report Submission Date:

Council Representative Approved	Date:





Your Name:\_\_\_\_\_

How You Earned Money List all activities.	Income	How You Spent Money Attach all receipts.	Expenses	Remaining Funds
Example: cookie money	\$87.00	wood and nails	\$85.50	\$1.50

If you had any income left after your Take Action Project, what was the money used for?



Your Name: \_\_\_\_\_

Date	Hours	What Did You Do? Be specific.

\_\_\_\_\_ = Total Number of Hours





Girl Scout Silver Award | Final Report

Your Name: \_\_\_\_\_

### Submit completed form to:

Girl Scouts of Middle Tennessee Attn: Silver Award 4522 Granny White Pike Nashville, TN 37204

OR

HighestAwards@gsmidtn.org

#### For questions, contact:

Lily Jaremski (615) 460-0223 Ljaremski@gsmidtn.org

