



Girl Scouts Heart of the Hudson

Girl Scout Gold Award Final Report

Please fill out using a word processing program; type or print in black ink. Make copies for your Girl Scout Gold Award Project advisor, your troop/group advisor and for you to keep. Submit original to the Girl Scout Gold Award Committee within 30 days of completing your project. You will receive notification of your appointment time.

Name		Phone	
Address	Town	Zip	
Community #	Troop #	Email	
School		Age	Grade
Name of Project Advisor		Project Advisor's Phone #	
Address	Town	Zip	Email
Troop/Group Advisor:		Troop/Group Number:	
Troop/Group Advisor's Phone: ())		E-Mail:	
Girl Scout Gold Award Project Advisor:			
Project Advisor's Phone: ())		Project Advisor's E-Mail:	

Title of Project:

Please describe your project using one or two sentences:

STEP 6: Tracking Project Hours

Date started: _____ Date completed: _____
 Please bring your time log with you to when you present your project.

STEP 7: Reflection and Evaluation

- A. Briefly summarize your project. Include the issue your project addressed and the methods you used for meeting project objectives.

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

- C. Detail the method used for evaluating the impact of your project.

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

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

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

Your signature: _____ Date: _____

Gold Award Project Advisor's signature: _____ Date: _____

ACTIONS:	DATE:
Received by Council on:	
Final approval given:	

Approved: _____ Date: _____
 Council Representative