



Girl Scout Gold Award Final Report

for Girl Scouts of Eastern Massachusetts, Inc.
265 Beaver St., Waltham, MA 02452

Please fill out using a word processing program, or type or print in black ink. Make copies for your Girl Scout Gold Award Project Advisor and for you to keep. SUBMIT ORIGINAL TO YOUR COUNCIL.

Name: _____ **Phone:** _____

Address: _____

Age: _____ Grade: _____ School: _____

Your e-mail: _____

Troop/group advisor: _____ Troop/group #: _____

Troop/group advisor's phone: (____) _____ E-Mail: _____

Girl Scout Gold Award Project Advisor: _____

Project Advisor's Phone: (____) _____ E-Mail: _____

Title of Project: _____

STEP 5: Tracking Project Hours

Date started: _____ **Date Completed:** _____

STEP 7. Think About It

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

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? How were you challenged?

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: _____

Girl Scout Gold Award Project Advisor signature: _____

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

Approved: _____ Date: _____
Council Representative