girl scouts

Your Name:_____

Council Name:

Submit the original completed form to your council. Make copies for your Girl Scout Gold Award project advisor and you to keep.

Contact Information

Name:_____

Address:_____

City:_____ State:_____ Zip Code:_____

Email:_____ Phone:_____

Age:_____ Grade:_____ School:_____

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

Troop/Group Volunteer's Phone:_____ Email:_____

Girl Scout Gold Award Project Advisor:_____

Project Advisor's Organization:_____

Project Advisor's Phone:_____ Email:_____

Your Team

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

Team Members	Affiliation	Role

Girl Scout Gold Award® gogold

Your Name:_____

Take Action Project

Project Title: _____

Start Date:_____ **Completion Date:**_____ **Hours:**_____

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

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

C. How will your project be sustained beyond your involvement?

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

Your Name:_____

E. Describe any obstacles you encountered and what you did to overcome them.

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

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

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

I. What aspects of your project would you change or do differently if you could start over?

Your Name:_____

Impact Chart

Using the Impact Chart, describe the impact signs your project has had and will have on your community and your target audience.

Impact On...	Goals	Examples of Immediate Impact	Possible Future Impact
Community	What community issue was addressed?	What are concrete examples that you made a difference?	What examples of the project impact might you see in the future?
Target Audience (workshop participants, other youth, community members, and so on)	What skills, knowledge, or attitudes did your target audience gain?	What examples demonstrate that the target audience gained skills or knowledge?	What would be examples of a long-term impact on your target audience?

Your Name:_____

Impact	Goals	Examples of Immediate Impact
You	**Which of the 15 Girl Scout Leadership Outcomes* listed do you think you were able to develop through this project?** **Discover:** ☐ I will develop a stronger sense of self. ☐ I will develop positive values. ☐ I will gain practical life skills. ☐ I will seek challenges in the world. ☐ I will develop critical thinking. **Connect:** ☐ I will develop healthy relationships. ☐ I will promote cooperation and team building. ☐ I will resolve conflicts. ☐ I will advance diversity in a multicultural world. ☐ I will feel more connected to my community, locally and globally. **Take Action:** ☐ I will identify community issues. ☐ I will be a resourceful problem solver. ☐ I will advocate for myself and others, locally and globally. ☐ I will educate and inspire others to act. ☐ I will feel empowered to make a difference in the world.	Within each leadership key (Discover, Connect, and Take Action), list one or two examples of your growth as a leader.

*Want more information on the Girl Scout Leadership Outcomes?
Visit www.girlscouts.org/research/publications/outcomes/transforming_leadership.asp.

Your Name:_____

Possible Future Impact

How do you think your leadership skills will grow in the future because of this project?

Your Signature:_____ Date:_____

Project Advisor's Signature:_____ Date:_____

Council Representative Approved:_____ Date:_____