



Girl Scout Silver Award Project Proposal

Girl Scouts of Greater Mississippi

- It is strongly suggested that girls or their advisor to take a Silver Award Webinar before submitting proposals
- Girls must submit paperwork 1-2 weeks prior to project start date via email to: <u>ljalufka@gsgms.org.</u> Projects involving camps will be sent to CEO for approval.
- Submit in typed format. NO handwritten forms will be reviewed.
- Girl Scout Silver Award Project Proposal will submit 1 completed form representing the individual or group of 2-4 girls working on the project.
- Girl Scout Silver Award Final Paper form <u>each girl</u> will submit their own form answering the questions in their own words. They may work together reviewing their project to answer the questions.
- Paperwork must be submitted together. Individual sets will not be processed until all girls working on projects paperwork is submitted.
- Girl Scout advisor will receive email verifying receipt of proposal paperwork and status of the project (approved, changes needed, etc

Do not begin project until you have received council approval. Questions? Contact ljalufka@gsgms.org

Members of your team:

| 1. Name: | Age: | Grade: |
|--|------------------|--------|
| 2. Name: | Age: | Grade: |
| 3. Name: | Age: | Grade: |
| 4. Name: | Age: | Grade: |
| | | |
| Individual or Troop/Group Number: | GS Service Unit: | |
| Girl Scout Advisor (Troop Leader): | | |
| Girl Scout Advisor's Phone: () | E-Mail: | |
| Girl Scout Advisor's Address: | City: | Zip: |
| Silver Award Project Advisor: | | |
| Silver Award Project Advisor's Phone: () | E-Mail: | |

The Girl Scout Silver Award Pre-requisites

Complete one (1) Girl Scout Cadette Journey. List the journey that you have completed along with your troop/group volunteer's signature.

| Cadette Journey Book | Date Completed | |
|----------------------|----------------|--|
| | | |

*List the names of individuals and organizations that you plan to work with on your GS Silver Award project. (Outside of Girl Scouts and Family) This is a preliminary list that may grow through the course of your project.

| Volunteers | Affiliation | Role | |
|------------|-------------|------|--|
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Girl Scout Silver Award Take Action Project

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Project Title:

Proposed start date: _____ Proposed completion date: _____

1. Describe the ISSUE your project will address. ISSUE:

2. Describe what your plan for your take action project is (be specific, continue on next page if needed):

3. Why have you chosen this project? Discuss your reasons for selecting this project.

If you need extra space, please continue your answers here:

4. Describe how you plan to tell others about your project and ADVOCATE about that issue by teaching, inspiring and educating others about (Web site, presentations, posters, videos, articles, and so on)

5. What methods or tools will you use to evaluate and MEASURE the impact of your project? (photos, surveys, views on website, and letter from organization you helped)

6. How will your project be SUSTAINABLE? (Who is going to continue advocating (educating, inspiring) about your issue once you are done?)

7. If you are working on a group project, what is your individual project assignment and area of responsibly that will show your LEADERSHIP? List each team member's responsibilities.

NAME: _____

PROJECT TITLE: _____

A Time Log must be submitted with your final report. Record hours spent in all activities of your project, including planning, preparing materials, purchasing supplies, conference time with advisors and consultants, soliciting donations from businesses or holding money earning events, preparation time spent at pre-meetings, special events, actual time spent leading an activity or event, etc. This form can be handwritten.

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| Date | Activity | Estimated # Hours |
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| | Total Number of Hours (suggested minimum of 50) | |
| | Total Number of Hours (Suggested minimum of 50) | |

Your signature