



Girl Scout Silver Award Outline

Troop # _____ Service Unit _____ Project Title _____
 Leader's Name _____ Phone # _____
 Email _____
 Project Advisor Name _____ Phone # _____
 Email _____

Project Start Date _____ Project Completion Date _____

Please list the name and contact info for each girl that will be working on this Silver project.
 (The Silver Award Project may be done individually or preferably in **small groups**.)

<u>Name</u>	<u>Address</u>	<u>Phone#</u>
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____
4. _____	_____	_____
5. _____	_____	_____
6. _____	_____	_____

Name of the *Journey* completed for this project _____

Journey start date _____ Journey end date _____

Briefly describe the *Take Action* project you did for the above Journey

What do you hope you will *Discover* while participating in this project?

How will you *Connect* with your team and the community while participating in this project?

What will be some of the *Take Action* outcomes and impacts on the community achieved as a result of participating in this project?

Date Submitted to GSU _____