

Girl Scout Council of Hawaii
Silver Report Form

(one copy to Service Unit Manager / MDD, one copy to Council and one copy for Girl Records)

Name _____ Date of Birth _____ Grade _____

Address _____
Street City Zip

Phone # _____ E-mail address _____

Project Title: _____ Date of Silver Award Project: _____

Service Unit _____ Troop # _____

Leader/Advisor Name(s) _____

Parent's Names _____

Requirements 1-4 must be completed prior to beginning Requirement 5.

1.	Interest Project Patches Titles: (three I.P.s) • Needs to relate to project	Date Completed:	Leader/Consultant Signature
	_____	_____	_____
	_____	_____	_____
	_____	_____	_____

2.	From Dreams to Reality Patch • List activity numbers	Date Completed:	Leader/Consultant Signature
	_____	_____	_____
	• Career Activities (list two activities)		
	_____	_____	_____
	_____	_____	_____

3.	Cadette Leadership Award	Date Completed:	Leader/Consultant Signature
	_____	_____	_____
	• Leadership I.P. Activities (list two activities)		
	_____	_____	_____
	_____	_____	_____

4.	Cadette Girl Scout Challenge: (1 activity in each of the 5 sections)	Date Completed:	Leader/Consultant Signature
		_____	_____

Please answer questions stated on back of form.

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5. Please address or outline the following questions about your Silver Award Project. Please attach a separate sheet(s) to form.

- Describe in detail your Silver Award Project. What did you do? Where was it held? What community did your project serve? How many people were served by your project?
- What was the reason for selecting this project?
- List the consultants, advisors, Girl Scout troops, community members that helped you facilitate your project and their role.
- How did you finance your project?
- What would you do differently or change about your project?
- What was the most successful aspect about your project?
- How many hours did you spend planning and facilitating your project?

Project Advisor Signature _____ Date _____

Leader Signature _____ Date _____

Your Signature _____ Date _____