

Please print in blue or black ink. Use additional paper if needed. Make two copies when completed. Keep one for yourself and give one to your advisor. **Submit the original to your nearest Service Center with your Time Sheet.** In order to receive your award at the Teen Award Ceremony for the current membership year (held in the spring) your final paperwork is due by March 1.. The final deadline for these forms to be turned in is September 30 of the year you complete the 8th grade.

Girl Name: _____ Troop number: _____

Address: _____ City: _____ Zip: _____

County: _____ Phone(s): _____

Birth date: _____ Age: _____ *Grade: _____

***If filling out this form June-September, enter the grade just completed.**

Project advisor: _____ Phone: () _____

Cadette Journey Completed: _____

Date Completed: _____

How did this journey relate to your project? _____

Team Project Members (if applicable): _____

Take Action Project

Title of project (how you want it announced in Girl Scout publications): _____

Date started: _____ Date Completed: _____ Total Hours: _____.

All responses to the following section must be typed.
**Please use additional sheets of paper and number all responses
or type directly in this document.**

1. Briefly summarize your project.
2. Discuss the benefits your project provided to others in the community.
3. Detail the method used for evaluating the impact of your project.
4. What did you learn about yourself as a result of this project?
5. What aspects of your project would you change or do differently?
6. What was the most successful aspect of your project?
7. How is your project sustainable (how will it keep going now that you are done)?
8. Does your project have a Global Connection? If so, how?
9. How did you share your project?

Please submit at least one photograph of your project with this report.

Your signature: _____ Date: _____

Advisor's Signature: _____ Date: _____

PLEASE RETURN THIS FORM TO YOUR NEAREST COUNCIL SERVICE CENTER.

Girl Scouts of Michigan Shore to Shore
Attn: Program Manager

Grand Rapids Area
3275 Walker Ave. NW
Grand Rapids, MI 49544

Muskegon Area
1201 E. River Rd.
Muskegon, MI 49445

Traverse City Area
1820 Oak Hollow Dr.
Traverse City, MI 49686

Council Actions	Date:
Received by Council:	
Final Approval Given:	
Letter mailed:	
Program Manager:	