



Girl Scout Gold Award Project Proposal

Girl Scouts - North Carolina Coastal Pines
 c/o Girl Scout Gold Award Support Committee
 P.O. Box 91649, Raleigh, NC 27675-1649

Please fill out using a word processing program, type or print in black ink. Remember to make copies for you, your Girl Scout Gold Award Project advisor, and your troop/group advisor. Submit original in accordance with established due dates in the GO! magazine and at least 8 weeks prior to starting your project. Do not begin project until you have received council approval.

Name: _____ County: _____

Address: _____ City/State: _____ Zip: _____

Phone: (____) _____ Your Email: _____

Age: ____ Birthdate: _____ Grade: ____ School Year: _____ School: _____

STEP 1: GET READY – Adult Support for Girl Scout Gold Award Process (Each girl should have a minimum of two adults supporting her - troop/group advisor and project advisor. At least one of these adults must be someone other than the girl's parent.)

Troop Advisor: _____ Troop/Group Number: _____

Troop Advisor's Address: _____ City/Zip: _____

Troop Advisor's Phone: (____) _____ Email: _____

Girl Scout Gold Award Project Advisor: _____

Project Advisor's Address: _____ City/Zip: _____

Project Advisor's Phone: (____) _____ Email: _____

Event Director (if applicable): _____

Event Director's Address: _____ City/Zip: _____

Event Director's Phone: (____) _____ Email: _____

**** Attach copy of timeline developed by you and your advisor.**

STEP 2: GIRL SCOUT GOLD LEADERSHIP AWARD

Activities	Date Completed	Advisor* Signature
1. Earn It: IP:		
IP:		
IP:		
2. Believe It: STUDIO 2B Focus Book:		
3. Lead It: (30 hours) Describe:		

*Can be signature of your Troop/group advisor or Girl Scout Gold Award project advisor.

STEP 3: GIRL SCOUT GOLD CAREER AWARD

Describe 40 hour career related activity:	Date Completed	Advisor Signature

*Can be signature of your troop/group advisor or Girl Scout Gold Award project advisor.

STEP 4: GIRL SCOUT GOLD 4 B'S CHALLENGE AWARD

Please describe each step and show the amount of time spent on each. Provide attachments as needed.

Activity	Date Completed	Project Advisor Signature
A. Become		
B. Belong		
C. Believe		
D. Build		

STEP 5: GIRL SCOUT GOLD AWARD PROJECT

Thoroughly explain your Girl Scout Gold Award Project Plan by answering the following questions. Use separate sheets of paper using only the A-G format below. Include the who, what, where, when, why and how for each aspect. Provide attachments as needed.

Title of Project: _____

Proposed start date: _____ Proposed completion date: _____

- A. Describe your Girl Scout Gold Award service project. Specifically, what is it?

- B. Describe the issue your project will address, what you hope to achieve, who will benefit, and how the community will be involved in the project. Be specific (i.e. who, how many, ages, etc.). Remember, the project should address an expressed community need that goes beyond the Girl Scout community. It should also not be a "tie in" to a pre-existing program. Enclose a signed letter of support from the benefiting organization. It will help identify the community need and demonstrate support of your efforts.

- C. Discuss the reasons for selecting this project.
- D. Outline your strengths, talents, and skills that will be put into action.
- E. Is this an event? yes no (If you check "yes", you must consult with a registered adult Girl Scout who has completed event director training. List this person's name in Step 1.)
- F. What is/are the proposed date(s) of the project?
- G. Describe the steps involved you for putting your plan into action, including facilities and/or equipment needed. Include a timeline for completing these steps of your proposed project which includes an estimate of amount of time spent on each step to show how you envision accomplishing the minimum of 65 hours.
- H. Indicate methods and/or tools you will utilize to evaluate the effectiveness of your project?
- I. List the names of advisors and resources you plan to use. Make sure you indicate the names of trained adult event director, troop camp licensed adult, adult first aider, etc. (as needed for your project).
- J. Estimate overall project expenses and how you plan to meet these costs (attach copy of budget sheet from your record book). Reminder: Girl Scouts cannot solicit monetary donations or raise funds for another organization (refer to *Safety-Wise* guidelines).

Your signature: _____ Date: _____

Project Advisor's signature: _____ Date: _____

Troop/Group Advisor's signature: _____ Date: _____

ACTIONS:	DATE:
Received by Council on:	
Date of Action:	
Action Taken:	
Committee Liaison:	

Approved: _____
Gold Award Support Committee Representative

Date: _____

Remember to include needed attachments:

- Timeline for steps for Girl Scout Gold Award (see Step 1).
- Letter of support from the benefiting organization (see Step 5-B)
- 4B's Challenge (Step 4)
- Timeline for Girl Scout Gold Award Project (Step 5-G)