

Green Project Report
Girl Scout – North Carolina Coastal Pines
Program Department
P.O. Box 91649, Raleigh, NC 27675

Contact Information

Name: _____

Address: _____

City: _____ State:: _____ Zip code: _____

E-mail: _____ Phone: _____

Age: _____ Grade: _____ Troop/Group Number;: _____

School: _____

Project Advisor: _____

Project Advisor's Organization: _____

Project Advisor's Phone: (_____) _____

E-mail: _____

Your Team: List the names of individuals and organizations that worked with you on your Take Action Project.

Project Title: _____

Start Date: _____ Completion Date: _____ Hours: _____

A. Describe the issue your project addressed, what you achieved, and who benefitted.

B. Discuss the reasons for selecting this project.

C. How will your project be sustained beyond your involvement?

D. Explain the local and/or global link to your project.

E. Describe what you learned from this project. What did you learn about yourself as a result of this project?

F. What was the most successful aspect of your project?

G. What aspects of your project would you change or do differently if you could start over?
