



Name: _____

Troop/Group #: _____

Girl Scouts of Shagbark Council

Silver Award

Project Proposal



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Silver Award Project Proposal Checklist

- _____ The paperwork is typed, word processed or neatly written in paragraph form with accurate grammar and spelling.
- _____ The project meets a unique need in the community currently not being met.
- _____ The project clearly demonstrates how the Girl Scouts' initiative and leadership skills will be used.
- _____ The community served reaches beyond Girl Scouting.
- _____ The project's continuing impact in the community is clearly outlined.
- _____ The project is financially feasible for the Girl Scout and a financial plan is included. Use Form C to outline your tentative budget.
- _____ The project described follows Girl Scout *Safety-Wise* guidelines.
- _____ A letter of support of the project idea is included from all collaborative outside organizations.
- _____ Timeline from Step 1 through 7 must be submitted with your project proposal (*see Form A in this package*)
- _____ The project described will require a minimum of 40 hours of **productive** time involvement.
- _____ Group projects: each girl must have an individual project assignment, with a clearly defined area of responsibility that will support a minimum of 40 hours.
- _____ Make a copy for your records. Submit the original to the Council Service Center.



Girl Scout Silver Award Project Proposal Girl Scouts of Shagbark Council

Make copies for your Girl Scout Silver Award Project advisor and for you to keep. Do not begin your project until you have received council approval.

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: (____) _____ Your e-mail: _____

Parent / Guardian Name: _____

Age: _____ Grade: _____ School: _____

Month / Year Registered as Cadette Girl Scout: _____

Service Unit: _____ # of years in Girl Scouting: _____

STEP 1: ORGANIZE

Troop/Group Advisor: _____ Troop/Group Number: _____

Troop/Group Advisor's Phone: (____) _____ e-mail: _____

Project Advisor: _____

Project Advisor's Phone: (____) _____ e-mail: _____

Date Silver Award Workshop attended: _____

Attach a copy of your completed timeline. See *Form "A" in this package.*

STEP 2: LEAD – The Girl Scout Silver Leadership Award

Activities	Date Completed	Advisor Signature*
1. Earn It: IP:		
IP:		
IP:		
2. STUDIO 2B Focus book: uniquely me! The Real Deal		

Activities	Date Completed	Advisor Signature*
3. Lead It: (15 hours) Describe activities and document your hours using the <i>Leadership Time Log (Form B)</i> located in this packet.		

STEP 3: NETWORK - GIRL SCOUT SILVER CAREER AWARD (CHARM)

Earning your Silver Career Award Charm gives you a process for planning your direction after high school.

The details of this Award can be found in Step 3 of the Silver Award Project Journal.

Activities	Date Completed	Advisor Signature*
1. What's Out There		
2. Who's Out There		
IP: Be your Own Boss – Earn “Your Own business” Interest Project Award from the <i>Interest Projects for Girl Scouts 11-17 Book</i>		
Journal (Reflection)		

STEP 4: GIRL SCOUT SILVER 4Bs AWARD

Activity	Date Completed	Advisor Signature*
Become – Set goals for self-improvement		
Belong – Earn the charm from STUDIO 2B Focus: <i>Looking In, Reaching Out</i>		
Believe – Identify an issue in school or community that you feel strongly about. Find out more about it. Use your voice to address it.		
Build – Focus on coming up with a solution to address a problem.		

Be sure to journal what you did using the Girl Scouts of Shagbark Council Silver Award Journal.

Note: Planning hours for the Silver 4B's Challenge may be applied to the Girl Scout Silver Award hours in Step 5.



Name: _____

Troop Number: _____

Step 5: CREATE – Plan your Girl Scout Silver Award Project

Project Title: _____

Proposed start date: _____ Proposed completion date: _____

Answer the following questions in regard to your proposed project. If more space is needed, please use additional sheets of paper.

- Describe what you are going to do for your project.

- Why have you chosen this project?

- What do you hope to accomplish with your project? How will this project benefit others?

- What is the lasting effect on the community?

- How is this project different than a service project?

- Is any training required for this project?

- Estimate overall project expenses and how you plan to meet these costs. Use *FormC* in this packet.

SIGNATURES:

Your name printed

Signature

Date

Troop Advisor's name printed

Signature

Date

Project Advisor's name printed
(if different than above)

Signature

Date

**SILVER AWARD
PROJECT PROPOSAL**

TIMELINE

Name: _____

Troop # _____

<u>Step #</u>	<u>Projected Start Date</u>	<u>Projected End Date</u>
1 – Get Ready		
2 – Leadership Award		
3 – Career Award		
4 – 4B’s Challenge		
5 – Create your Project		
6 – Do the Award Project		
7 – Reflect/Evaluate		
8 - Celebrate		

SILVER AWARD BUDGET SPREADSHEET

Name: _____ Troop # _____

Project Title: _____

List any of your anticipated budget items and their cost.

Expense Item	Amount
	TOTAL