



# Girl Scouts in the Heart of Pennsylvania Bronze Award Final Report

## Submit Final Report by September 30<sup>th</sup> or before the recipients begin 6<sup>th</sup> grade.

Please make a copy of this application for yourself, and submit the ORIGINAL to:

**Girl Scouts in the Heart of Pennsylvania** Program Department 350 Hale Avenue, Harrisburg, PA 17104

# **Troop Information**

Troop Number (5 Digit):	Community:	
Leader(s) Name:		
Address:	City:	State:
Zip: County:		
Troop Leader Email Address:	Telephone: ( )	
Junior Level Journey/ Prerequisite		
Journey Book Title:		
Completed Date:/		

#### **Team Members**

Please print the full name of each girl who should be receiving the award. If you need more room for team member names, please use a separate sheet of paper and attach to the form.

Team Member's Name	Organization/ Affiliation	Title

#### **Take Action Project**

Start Date: \_\_\_\_\_ Completion Date: \_\_\_\_\_

### Our Take Action Project falls into the following categories (please check all that apply):

Community and Economic Development	Disaster Relief/Recovery
□Education	Environmental
Health/Nutrition	□Human Needs/General
□Independent Living (Senior Citizen needs)	□Public Safety
□Youth Development	□Other:

- 1. Describe your group's Take Action project.
- 2. Describe the issue your project addressed. Who was your target audience?
- 3. Discuss your reasons for selecting this project.
- 4. Describe what you did to Take Action (i.e., How did you share your project and inspire others with a web-site, blog, presentation, poster, video, article, etc.?)

- 5. What was the most successful aspect of your project?
- 6. What, if any, aspects of your project are sustainable (will continue after your group has stopped working on the project)?
- 7. Describe what your group learned from this project including leadership skills you developed.
- 8. How do you think your group's leadership skills will grow in the future because of this project?

Troop Leader Signature	Date
Approved by Membership Associate Date	
To purchase Bronze Award Pins please fill out the below informa	
Bronze Award Pin(s) Order Fo	
Name: 5-Digit Address:	
City:, State:, Z	
Number of Pins:@ \$7.50 Each Plu	us fee for Shipping & Handling
Please make all checks and money orders payable to <b>GSHPA</b>	
MasterCard, Visa, AmEx, Discover:	
Expiration Date: CVV Code:	
Signature:	
	Shipping & Handling
	Up to \$10.00 \$4.95
Total amount enclosed: <b>\$</b>	
 Total amount enclosed: <b>\$</b>	Up to \$10.00     \$4.95       \$10.01 - \$30.00     \$5.95       \$30.01 - \$55.00     \$7.95       \$55.01 - \$80.00     \$9.95
	Up to \$10.00     \$4.95       \$10.01 - \$30.00     \$5.95       \$30.01 - \$55.00     \$7.95       \$55.01 - \$80.00     \$9.95       \$80.01 - \$99.00     \$11.95
Total amount enclosed: \$ Please Note: Submitting your form without your Membership Associate Approval Signature will delay	Up to \$10.00     \$4.95       \$10.01 - \$30.00     \$5.95       \$30.01 - \$55.00     \$7.95       \$55.01 - \$80.00     \$9.95