



# Girl Scout Bronze Award Final Report

Girl Scouts of West Central Florida

It is HIGHLY RECOMMENDED for Girls to take the **Bronze Award Workshop** before starting the GS Bronze Award

Troops must submit the Final paperwork, completed timeline, completed budget and pictures, documents and any other proof of your project to: [bronzeaward@gswcf.org](mailto:bronzeaward@gswcf.org) OR mail to

**Program Manager, Attn: Bronze Award, 4610 Eisenhower Blvd, Tampa Fl. 33634**

- Submit in typed or handwritten format (PEN ONLY- no pencil).
- Each group/troop only needs to submit **ONE** form with every girls name on it.
- Girl Scout advisor will receive email verifying receipt of their final paperwork and will be sent all congratulatory letters in the mail.

Questions? Contact [bronzeaward@gswcf.org](mailto:bronzeaward@gswcf.org)

## Members of the team:

- |                 |            |              |
|-----------------|------------|--------------|
| 1. Name: _____  | Age: _____ | Grade: _____ |
| 2. Name: _____  | Age: _____ | Grade: _____ |
| 3. Name: _____  | Age: _____ | Grade: _____ |
| 4. Name: _____  | Age: _____ | Grade: _____ |
| 5. Name: _____  | Age: _____ | Grade: _____ |
| 6. Name: _____  | Age: _____ | Grade: _____ |
| 7. Name: _____  | Age: _____ | Grade: _____ |
| 8. Name: _____  | Age: _____ | Grade: _____ |
| 9. Name: _____  | Age: _____ | Grade: _____ |
| 10. Name: _____ | Age: _____ | Grade: _____ |
| 11. Name: _____ | Age: _____ | Grade: _____ |
| 12. Name: _____ | Age: _____ | Grade: _____ |

Individual or Troop/Group Number: \_\_\_\_\_ GS Community: \_\_\_\_\_

Girl Scout Advisor: \_\_\_\_\_

Girl Scout Advisor Phone: \_\_\_\_\_ Girl Scout Advisor Email: \_\_\_\_\_

Girl Scout Advisor Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

*Your **Girl Scout Advisor**- is a trained Girl Scout volunteer that will help you with Girl Scout Bronze Award.*

A. Complete one Girl Scout Junior Journey

Title of Journey Completed: \_\_\_\_\_ Completion Date: \_\_\_\_\_

B. Girl Scout Bronze Award Take Action Project

Title of Take Action Project: \_\_\_\_\_

Start date: \_\_\_\_\_ Completion date: \_\_\_\_\_

C. REFLECTION.

1. Describe the ISSUE and ROOT CAUSE your project ADVOCATED about and how you did ADVOCATE.

**Issue:**

\_\_\_\_\_

**Root Cause:**

\_\_\_\_\_

**How did you teach, educate or inspire? (Web site, presentations, posters, videos, articles, and so on):**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. Part of the project process is to connect with new friends. Where did you find VOLUNTEERS to help you with your project (outside of Girl Scouts and your family)?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. How did taking action make you feel and what leadership skills did you develop from doing this project?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4. List two to three things your troop learned from your Bronze Award Project.

---

---

---

---

---

5. Which parts of the Girl Scout Promise and Law did you live out in your Bronze Award Project and how did you live them out?

---

---

---

---

---

6. What impact does your project have on your community?

---

---

---

---

---

Girl Scout Advisor signature: \_\_\_\_\_ Date: \_\_\_\_\_

Council Use Only	DATE
Received by Council and reviewed	



Total expenses: \_\_\_\_\_

# TIME LINE

Date	Time spent	Explain Activity (in detail)

\_\_\_\_\_ : Total number of hours for project  
Suggested minimum hours: 20 per girl