

## GOLD AWARD RECIPIENT BIOGRAPHY

Please complete this form and return it to Girl Scouts of Rhode Island, Inc.. **This information will be printed in this year's Gold Award Ceremony booklet.**

Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_  
(Street) (City/town) (State) (Zip)

Troop # \_\_\_\_\_ Troop Leader \_\_\_\_\_

Number of years in Girl Scouting \_\_\_\_\_ Date Gold Award completed \_\_\_\_\_

**\*\*\*\*\*IMPORTANT\*\*\*\*\***

**PLEASE TAKE THE TIME TO FILL OUT THIS FORM COMPLETELY AND AS YOU WISH IT TO APPEAR IN THE GOLD AWARD CEREMONY BOOKLET. BE VERY SPECIFIC IN TERMS OF YOUR PROJECT AND DETAILS/STEPS IN HOW YOU COMPLETED YOUR PROJECT.**

Gold Award Project Title: \_\_\_\_\_

What expressed need in the community did your project address? How and what did you do to meet this need?

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(OVER)

What was the most successful aspect of your project? \_\_\_\_\_

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What was the overall outcome of your project and was it a success? If it was not successful, what would you change if you were to try it again?

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Name of your high school: \_\_\_\_\_

Graduation date: \_\_\_\_\_

**After High School plans:**

What College or University are you attending or will be attending:

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What program do you wish to pursue at that College or University? (*Example: Major? Minor?*) And what do you wish to accomplish by getting into that program?

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Anything else you would like us to know about you? \_\_\_\_\_

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