

LEADER REPORT- year end

Return this form to your membership manager by June 15.

Troop# _____ Program level next year: _____ Service Unit: _____ # of girls in troop: _____

Leader: _____ Phone: (home) _____ (work) _____

Address: _____ City: _____ Zip: _____

Email Address _____

Co-leaders/adult assistants: _____

I will be returning as leader next year. Yes No If no, Troop disbanding New leader needed

I have recruited a new leader: Name _____ Phone _____

Has your troop used a Program Aide? Yes No If no, would you like more information? Yes No

* Training Completed: Online Orientation Leadership Essentials First Aid/CPR Let's Go

Troop Camping Other: _____

Training needs next year: _____

Our funders require reporting on program outcomes for girls participating in the Girl Scout Leadership Experience. This section provides outcome information regarding your troop activities.

* According to your observations, in which of the following areas have your girls shown improvement:

(The number of girls in your troop that you feel have shown improvement in each category. Put "n/a" in areas that do not apply)

- | | |
|---|---|
| <input type="checkbox"/> Cooperation & teambuilding _____ | <input type="checkbox"/> Effective communication & peer interaction _____ |
| <input type="checkbox"/> Goal setting _____ | <input type="checkbox"/> Problem solving _____ |
| <input type="checkbox"/> Decision-making _____ | <input type="checkbox"/> Demonstrating respect and acceptance of others _____ |
| <input type="checkbox"/> Share ideas/ opinions _____ | <input type="checkbox"/> Willingness to learn something new _____ |

* In which of the following program areas has your troop focused activities?

- | | | | |
|---|--|--|---|
| <input type="checkbox"/> Business | <input type="checkbox"/> Camping | <input type="checkbox"/> Careers | <input type="checkbox"/> Character building |
| <input type="checkbox"/> Communication skills | <input type="checkbox"/> Community | <input type="checkbox"/> Creative Arts | <input type="checkbox"/> Diversity |
| <input type="checkbox"/> Health & fitness | <input type="checkbox"/> Drugs & alcohol | <input type="checkbox"/> Girl Scout Ways | <input type="checkbox"/> Growing up female |
| <input type="checkbox"/> International | <input type="checkbox"/> Leadership | <input type="checkbox"/> Literacy | <input type="checkbox"/> Math |
| <input type="checkbox"/> Media | <input type="checkbox"/> Money management | <input type="checkbox"/> Outdoor education | <input type="checkbox"/> Safety |
| <input type="checkbox"/> Science | <input type="checkbox"/> Songs & games | <input type="checkbox"/> Sports | <input type="checkbox"/> Technology |
| <input type="checkbox"/> Travel | <input type="checkbox"/> Other: (please specify) _____ | | |

* Journeys the troop has worked with: _____

* Council programs you attended _____

* Service Unit programs you attended _____

* Community Service Completed:

Project	Who Benefitted	Hours spent on project (total all girl & adult hours)
_____	_____	_____
_____	_____	_____
_____	_____	_____

* List any trips taken or planned _____

* Troop Finances:

Bank: _____

Checking Savings

Account number: _____

Signers on the Account: _____

Balance at beginning of year: \$ _____

Total Income this year: _____

Total Expenses this year: _____

Current Balance: _____

Planned use for funds: _____

Do you have any funds not held in a bank account? Yes No If yes, Amount: \$ _____

location: _____

ATTACHMENTS REQUIRED:

A copy of your most recent bank statement

All receipts

This form must be completed and returned by **June 15** to your Membership Manager or mailed to:
GSDSW, Volunteer Services, 1012 Oregon Ave., Alamogordo, NM 88310