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[**Students Stand #withMalala**](https://www.malala.org/students-stand-with-malala) **Project Report Form**

Submit a typed copy of your completed project report form, within four weeks of your estimated project completion date, to Steph Dawes, sdawes@sdgirlscouts.org, or mail to:

Malala Project Grant

c/o Girl Scouts San Diego

1231 Upas St.

San Diego, CA 92103

Troop number: Leader name:

Leader’s mailing address:

City: Zip:

Email:

Phone 1: Phone 2:

Names of troop members on Take Action/Silver Award project team:

1.

2.

3.

4.

 Troop program age level(s): Troop current grade(s):

**Please respond to the following questions completely:**

**Narrative:** Provide a detailed description of the activities undertaken with the funds from this grant, including the progress made toward your goals, any relevant statistics or metrics, and unexpected delays or challenges.

**Did you make the change you wanted to? Y N**

**Why or why not? (200 words)**

**Storytelling — photos and video:** Statistics and metrics are not the only ways in which a meaningful project can demonstrate impact. Please share any inspiring stories, photos or video that will help us understand the change you made.

**Financial report:** Please attach a final budget for grant funds spent on your project.

**Letter of support:** Please attach a letter or statement from a non-related adult, project advisor or partnering organization confirming your troop’s project’s completion.

Signature of troop leader (required) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_

Signatures of troop Take Action/Silver Award project team members (required):

1. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_

2. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_

3. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_

4. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_