

# Girl Scouts of Michigan Trails ANNUAL TROOP REPORT

**DUE: JUNE 1<sup>ST</sup>**

Troop # \_\_\_\_\_ Level \_\_\_\_\_ Neighborhood \_\_\_\_\_

Leader (s) \_\_\_\_\_

1. Our Troop Sponsor is \_\_\_\_\_ They helped our troop by \_\_\_\_\_

2. Total number registered this year: Girls \_\_\_\_\_ Adults \_\_\_\_\_

3. What grade(s) are the girls in your troop in? \_\_\_\_\_

4. How often did your troop meet this year? Weekly Bi-weekly Monthly

5. Pins/Badges/Try-Its/IPPs, etc., earned this year: \_\_\_\_\_

6. Planning in my troop is:  girls plan  leader plans, girls vote  
 leader(s) plan  girls and leader plan together

7. Number of service projects we completed: \_\_\_\_\_ Examples:

A. \_\_\_\_\_

B. \_\_\_\_\_

C. \_\_\_\_\_

8. Activities: List number of times completed.

\_\_\_\_\_ Hikes \_\_\_\_\_ Trips \_\_\_\_\_

\_\_\_\_\_ Crafts \_\_\_\_\_

\_\_\_\_\_ Camping \_\_\_\_\_ Council Events \_\_\_\_\_

\_\_\_\_\_ Outdoor Cooking \_\_\_\_\_

\_\_\_\_\_ Science/Math \_\_\_\_\_ Neighborhood Events \_\_\_\_\_

\_\_\_\_\_ International Activities \_\_\_\_\_

9. Did the girls make at least five decisions in the past year?  Yes  No List examples:

A. \_\_\_\_\_ E. \_\_\_\_\_

B. \_\_\_\_\_ F. \_\_\_\_\_

C. \_\_\_\_\_ G. \_\_\_\_\_

D. \_\_\_\_\_ H. \_\_\_\_\_

10. Can your girls each list five things that make them feel good about themselves?  Yes  No List examples:

A. \_\_\_\_\_ E. \_\_\_\_\_

B. \_\_\_\_\_ F. \_\_\_\_\_

C. \_\_\_\_\_

G. \_\_\_\_\_

D. \_\_\_\_\_

H. \_\_\_\_\_

11. Could the girls list 3 special talents that make them unique from everyone else in the group?  Yes  No

A. \_\_\_\_\_

E. \_\_\_\_\_

B. \_\_\_\_\_

F. \_\_\_\_\_

C. \_\_\_\_\_

G. \_\_\_\_\_

D. \_\_\_\_\_

H. \_\_\_\_\_

12. Did you and your girls have a discussion about peer pressure and/or how resolve conflict in a peaceful way?

Yes  No Please list some solutions.

A. \_\_\_\_\_

C. \_\_\_\_\_

B. \_\_\_\_\_

D. \_\_\_\_\_

13. Did the girls participate in any activity in which they learned about someone who is different from them? (That person might be different because of age, race, religion, geography, or language.)  Yes  No Describe:

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

14. Check which resources you utilized during the past year:

_____ Neighborhood Meetings	_____ Council Event/Training Calendar	_____ Staff
_____ Neighborhood Manager	_____ Council Newsletter	_____ Resource Room
_____ Other Volunteers	_____ Council Leader Handbook	_____ Age Level Handbook
_____ Safety-Wise	_____ Other _____	_____ Website/Internet

15. Did you attend any Council training in the past year? Yes No List:

\_\_\_\_\_

16. What other training would you like to see offered? \_\_\_\_\_

17. What could you, as a volunteer, have used this year from Council? \_\_\_\_\_

\_\_\_\_\_

18. Do you plan to return as a leader? \_\_\_\_\_ If no, who is your replacement? \_\_\_\_\_

**TROOP FINANCIAL STATEMENT**

Balance as of May 31<sup>st</sup> \$ \_\_\_\_\_ Funds to be used this summer? \$ \_\_\_\_\_

Funds available for the fall \$ \_\_\_\_\_ Bank Name \_\_\_\_\_

**Please attach last month's bank statement.**

I HAVE COMPILED ALL THE ABOVE INFORMATION AND TO THE BEST OF MY KNOWLEDGE, BELIEVE IT TO BE CORRECT.

**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**TROOP REPORTS ARE DUE JUNE 1**

KEEP – PINK      SEND – WHITE TO NEIGHBORHOOD MANAGER      SEND – YELLOW TO SERVICE CENTER

mtgsdirect/forms misc/Annual Troop Report