

Quick Start - Self Study Training Evaluation

Please indicate your training session: \square Daisy \square Brownie \square Junior

To receive credit for your self-study training, please complete and submit this training evaluation.

Name						
Addre	ss <u>City</u> Zip					•
EmailPhone number						•
Servic	e Unit # Troop #					
					1	
Please	check the number that best describes your knowledge, 5 – strongly agree, 1 – strongly disagree.	1	2	3	4	5
1.	I can list six of "The Ten Essential Elements for Troops"					
2.	I can name the three Journeys for my grade level					
3.	I can describe the difference between Community Service and Service Learning/Take Action Project					
4.	I can explain the Anatomy of a Badge to the girls in my troop					
5.	I can help the girls with planning three different Girl Scout Ceremonies					
6.	I can facilitate the three Girl Scout processes when having troop meetings					
7.	I can explain to the parents how the cookie program's five skills benefit their daughters					
8.	This training met my expectations					
9.	I now feel more confident working with the girls in my new grade level					

Please let us know if you have any comments/questions:

THANK YOU.

Please submit (mail/fax/e-mail) your evaluation to:

Girl Scouts of Greater Chicago and Northwest Indiana

E-mail: <u>Training-GL@girlscoutsgcnwi.org</u>

• Fax: 708-957-8506

• Mail/Drop-Off: Any GSGCNWI Gathering Place