

# Annual Troop Evaluation/Projection Form

Girl Scouts of River Bluffs Council

Service Unit \_\_\_\_\_ Troop # \_\_\_\_\_ Grade Level \_\_\_\_\_

School \_\_\_\_\_ Town \_\_\_\_\_

Dear Service Unit Manager,

Here's how I think things went in my troop/group this year:

Girl Behavior:

Parent and other adult support:

Overall program, including camping and outings:

Troop meeting place and time:

Additional support or training needed:

Things I might have done differently:

The following adults will not be in this troop next year (list names, reasons, and future plans):

The following girls will not be in this troop next year (list names, reasons and future plans):

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Today's Date)

**Please return to your Service Unit Manager by:**