



Gold Award Record Card

For recording activities only. Please retain until Award completion is authorised by Gaisce

Participant's name: _____ PAL's name: _____

Community Involvement activity: _____

Wk	Date	Time	Signature of supervisor
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			
16			
17			
18			
19			
20			
21			
22			
23			
24			
25			
26			
27			
28			
29			
30			

Wk	Date	Time	Signature of supervisor
31			
32			
33			
34			
35			
36			
37			
38			
39			
40			
41			
42			
43			
44			
45			
46			
47			
48			
49			
50			
51			
52			

Personal Skill activity: _____

Wk	Date	Time	Signature of supervisor
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			

Wk	Date	Time	Signature of supervisor
12			
13			
14			
15			
16			
17			
18			
19			
20			
21			
22			
23			
24			
25			
26			
27			
28			
29			
30			
31			
32			
33			
34			
35			
36			
37			
38			
39			
40			
41			
42			
43			
44			
45			
46			
47			

Wk	Date	Time	Signature of supervisor
48			
49			
50			
51			
52			

Physical Recreation activity: _____

Wk	Date	Time	Signature of supervisor
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			
16			
17			
18			
19			
20			
21			
22			
23			
24			
25			
26			
27			
28			

Wk	Date	Time	Signature of supervisor
29			
30			
31			
32			
33			
34			
35			
36			
37			
38			
39			
40			
41			
42			
43			
44			
45			
46			
47			
48			
49			
50			
51			
52			

Adventure Journey: 4 days and 3 nights

Date From	Date To	Venue	Signature of supervisor

Residential Project: 5 days and 4 nights

Date From	Date To	Venue	Signature of supervisor

activity: for an additional one hour per week for 26 weeks
(participants choose to extend one of their activities)

Wk	Date	Time	Signature of supervisor
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			
16			
17			
18			
19			
20			
21			
22			
23			
24			
25			
26			