GAISCE
THE PRESIDENT'S
AWARD

This sheet is for recording activities only.
Please retain until Award completion is
authorised by Gaisce - The President's Award

GAISCE SILVER AWARD RECORD SHEET

PARTICIPANT NAME:_____ PAL NAME:_____

COMMUNITY INVOLVEMENT

WEEK	DATE	TIME	SUPERVISOR SIGNATURE
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			

SHOW US WHAT YOU'RE UP TO! TAG @GAISCEAWARD

GAISCE
THE PRESIDENT'S
AWARD

This sheet is for recording activities only.
Please retain until Award completion is
authorised by Gaisce - The President's Award

PERSONAL SKILL

WEEK	DATE	TIME	SUPERVISOR SIGNATURE
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			

SHOW US WHAT YOU'RE UP TO! TAG @GAISCEAWARD

GAISCE
THE PRESIDENT'S
AWARD

This sheet is for recording activities only.
Please retain until Award completion is
authorised by Gaisce - The President's Award

PHYSICAL RECREATION

WEEK	DATE	TIME	SUPERVISOR SIGNATURE
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			

SHOW US WHAT YOU'RE UP TO! TAG @GAISCEAWARD

GAISCE
THE PRESIDENT'S
AWARD

This sheet is for recording activities only.
Please retain until Award completion is
authorised by Gaisce - The President's Award

ADDITIONAL 26 WEEKS OF 1 CHALLENGE AREA →

WEEK	DATE	TIME	SUPERVISOR SIGNATURE
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			

ADVENTURE JOURNEY: 3 DAYS, 2 NIGHTS

DATE FROM	DATE TO	VENUE AND ACTIVITIES UNDERTAKEN	SUPERVISOR SIGNATURE

SHOW US WHAT YOU'RE UP TO! TAG @GAISCEAWARD