



GIRL GUIDES SINGAPORE

9 BISHAN STREET 14

SINGAPORE 579785

BASIC TRAINING COURSE - MODULE III

UNIT VISIT

Name of Guider Observed : _____

Name of School : _____

Date/Time of Unit Visit: _____

Date of BTC : _____

Division : _____ Unit : _____

Tel: _____ (Sch) _____ (Hp)

1. PARTICULARS OF UNIT

(To be completed by the Guider before the Observation meeting)

	Year Registered	Current Strength	No of Guiders/Remarks
1 st Pack			
2 nd Pack			

Brownies Progress / Attainment (Current Year) :

Level	P3	P4	P5	P6
Tweenies				
Golden Badge				
Golden Bar				
Golden Hand				
Sixer				
Chief Commissioner Award				
Proficiency Badges (To attach badge list)				

2. PROGRAMME PLANNING

(Sections 2 -5 to be completed by Commissioner/Trainer)

Please tick where applicable		Yes	No
2.1	Is the meeting of 1 ½ - 2 hours well used?		
2.2	Is the attendance record up-to-date?		
2.3	Are set ceremonies (e.g. Brownie Ring) carried out correctly?		
2.4	Are the Brownies correctly and suitable attired?		
2.5	<p>Does the meeting provide opportunities for the development of any of the 5-point programme :</p> <p>Point : _____</p> <p>Module : _____</p> <p>Remarks :</p>		
	<p>Point : _____</p> <p>Module : _____</p> <p>Remarks :</p>		

Please tick where applicable		Yes	No
2.6	Is the Six System evident? Remarks :		
2.7	Do the Guiders work as a team in carrying out the programme at the meeting? Remarks :		

3. UNIT MANAGEMENT

Please tick where applicable		Yes	No
3.1	Are the unit budget properly kept? Remarks :		
3.2	Is Pow-Wow held regularly? Remarks :		

Please tick where applicable		Yes	No
3.3	<p>Do Guiders and Brownies participate actively in Division and Headquarter's projects and activities?</p> <p>Remarks :</p>		

4. FACILITIES

Please tick where applicable		Yes	No
4.1	<p>Does the Pack have sufficient training area?</p> <p>Remarks :</p>		
4.2	<p>Does the Pack make full use of indoor and outdoor facilities?</p> <p>Remarks :</p>		
4.3	<p>Does the Pack have enough storage space for their equipment?</p> <p>Remarks :</p>		

5. DIALOGUE WITH GUIDER

Please tick where applicable		Yes	No
5.1	Guider opted for the CCA ? Remarks :		
5.2	Guider's direction/aim for Pack. Remarks :		
5.3	Guider's strength Remarks :		
5.4	AFI (Area For Improvement) Remarks :		
5.5	Guider's Feedback/Suggestion/Needs:		

6. RECOMMENDATION

I have observed _____ on _____
Name of Guider *Date*

and recommend that :-

she be issued with the Warrant for Brownie Guider.

she undergoes another observation after the issuance of the Warrant.

Name of Commissioner/Trainer : _____
In BLOCK LETTERS

Signature: _____

Date: _____

*Delete if not applicable