



Juliette Low World Friendship Patch Program

The purpose of this patch program for Girl Scouts is to increase girls' awareness of international issues. Girl Scouts of all levels may earn the Juliette Low World Friendship (JLWF) Patch. The JLWF patch is purchased by the troop and is an unofficial insignia. The patch(s) is worn on the back of the sash or vest.

Girl Scouts, who have already earned the patch, but continue to contribute to the JLWF Fund or attend a World Thinking Day observance, may purchase a segment that signifies an ongoing commitment to world friendship.

Activities

Girls must complete five activities, including number 9 or 10.

1. Learn to say "thank you" in four languages.
2. Find out how a person may become a U.S. citizen.
3. Celebrate a holiday with international customs.
4. Plan an international program with or for another troop/group.
5. Have a "tasting tea" of international goodies.
6. Learn about five women from other countries such as artists, politicians, scientists, writers, teachers and innovators.
7. Name five major religions around the world.
8. Invite someone who has lived in another country to your troop meeting. Learn about the lives of children in that country.
- 9. Find out about the Juliette Low World Friendship Fund (JLWFF) and make a contribution to the Fund through Girl Scouts of Eastern Missouri and/or**
- 10. Plan/attend a World Thinking Day observance.**
11. Name currencies used in six countries.
12. Locate member countries of the World Association of Girl Guides and Girl Scouts (WAGGGS) and four World Centers on a world map. Mark the International Date Line on the map and locate where Girl Guides Girl Scouts are first to start a day. When your troop is meeting, what time is it in Japan, France, Iran and Venezuela?
13. Plan your own international activity.

When all patch activities are completed, return your troop's evaluation and contribution form, if applicable, to the Girl Scouts of Eastern Missouri Service Center.

Include your patch order as applicable; contributions to the JLWFF must accompany the order.

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Did your troop/group participate in the Juliette Low World friendship patch Program?

Yes _____ no _____

Contribution amount \$ _____ or World Thinking Day Observance _____

Number of main patches \$1.15 each _____

Number of segments at 75¢ each _____

Total amount enclosed \$ _____

Troop Leader's Name _____

Address _____

City, State, Zip _____

Day Phone and Evening Phone _____

Email _____

Troop Number Current program level (Circle) D B J C S A

District and Neighborhood _____

Method of Payment: Check all that apply

Check or Money Order Make checks payable to: Girl Scouts of Eastern Missouri

Debit Card

Visa

MasterCard

Discover

Total Fee \$ _____

Credit card information:

Account # Exp. Date _____

Cardholder's signature Date _____

Juliette Low World Friendship Patch Program Evaluation

Number of Girls _____ Program Age Level: D B J C S A

Read these questions to the Girl Scouts in your troop/group and records the number of YES and NO answers to each question.

1. Did you try something you had never done before? Yes ___ No ___
2. Did you learn something you're going to use outside of Girl Scouts? Yes ___ No ___
3. Did you explore differences and similarities among people in your community?
Yes ___ No ___
4. Do you feel a stronger connection to your community? Yes ___ No ___
5. Did you share what you learned with others? Yes ___ No ___
6. Did you help decide which activities you were going to complete? Yes ___ No ___
7. Did you enjoy this patch program? Yes ___ No ___
8. Would you recommend this patch program to another troop? Yes ___ No ___

Adults, please answer these questions:

Would you recommend this patch program to another troop? Yes ___ No ___

Will this troop participate in this patch program again, if applicable? Yes ___ No ___

The following information is requested only to measure progress toward serving all girls in our jurisdiction. This information will be aggregated and used only for inclusion in research, evaluation and grant proposals. Individuals will not be identified by name.

Please indicate totals based on the entire troop.

Racial/Ethnic Background

American Indian/Alaskan Native ___ Asian ___ Black ___ Hawaiian/Pacific Islander ___

Other Race ___ White ___ Also Hispanic ___

Disabilities

Speech Impairment ___ Hearing Impairment ___ Specific Learning Disability ___

Visual Impairment ___ Physical Impairment ___ Other Impairment _____