

Eagle Scout Service Project Summary Form

Candidate/Eagle Scout

Name:		Age:	Phone:
Troop/Crew #:	Troop/Crew Sponsor:		Sponsor's City/Town:
DOB: / /	District:		Scout's email:

Project Beneficiary:

Name & Address:			State:
Type:	Church (w/denomination):	School/Non-profit civic/fraternal organization:	<u>Date Project Approved:</u>

Project Details:

Project Title:		Project Beneficiary Contact:		
Project Location:		Coach/Mentor Name:	Phone:	
Project Description:				
Describe beneficial results:				
Hours spent:	Scout Planning:	Scout Leading:	Work by others:	Total hours:
Cost of Materials:	Sponsor supplied: \$	Donated: \$	Purchased: \$	
Fundraising*	Money raised: \$	Donated: \$	Project value to beneficiary: \$	
Project Length:	Start: / /	Completed: / /	Total # days to complete project:	
Volunteers:	Family:	Scouts/Others:	Adults:	Total: Media coverage? Y
Other key project details:	N			
Candidate/Eagle Scout Signature:				Date:
District Notes:				<u>Eagle Rank date:</u>
District Advancement Chairman Signature: <i>Brian Snow</i>				Date:

Italicized items are from Eagle Scout Leadership Service Project Workbook, No. #512-927

*If applicable

Please submit form for: Eagle Project Approval; Eagle Rank Review & Awards.