

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:	<b>Date Project Approved:</b>		

**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:					
Candidate/Eagle Scout Signature:				Date:	
District Notes:				Eagle Rank date:	
District Advancement Chairman Signature:				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.**