



SERVICE PROJECT APPROVAL

Scout Name: _____

Current Rank: _____

Project Description: _____

Hours Requested: _____

Project Beneficiary: _____

Project Date: _____

Project Location: _____

Approved By Scoutmaster: _____

Date: _____

Signature of Beneficiary/Date: _____

Note: No Service Project may begin until approval of the Scoutmaster is received. Once the Project is complete, the Scout must obtain the signature of the Beneficiary that attests to the satisfactory completion of the Project. This form shall be submitted to the Advancement Chairperson at the time of the Board of Review for the rank for which this project was performed.