

## INFORMATION SHEET FOR EAGLE SCOUT PROJECTS

Name of Eagle Scout \_\_\_\_\_ Troop \_\_\_\_\_

Charter Membership Partner \_\_\_\_\_

City/Town \_\_\_\_\_ State \_\_\_\_\_

Parents Names \_\_\_\_\_

Number of Adults and Scouts who assisted \_\_\_\_\_ Total Hours \_\_\_\_\_

### BRIEF SYNOPSIS OF EAGLE PROJECT:

Please attach a picture of the youth. It will be returned to the Troop.

Submitted by: \_\_\_\_\_

District: \_\_\_\_\_

Please return to   Scouting America  
Gamehaven Council  
511 Northern Hills Dr NE,  
Ste.2, Rochester, MN 55906

