

# Troop 33

## Service Project Confirmation

Scout Name: \_\_\_\_\_ Current Rank: \_\_\_\_\_

Today's Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Service Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Number of Hours Worked: \_\_\_\_\_

Location of Service: \_\_\_\_\_

Detailed Description of Service *(TO BE COMPLETED BY SCOUT)*:

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Scout Signature: \_\_\_\_\_

Committee Chairperson Approval: \_\_\_\_\_ Date: \_\_\_\_\_

*All projects MUST be submitted to and discussed with Committee Chairperson **BEFORE** beginning Project. Credit will not be given for projects not having prior approval.*

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Comments by person in charge of project:

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Signature of Person in Charge of Service: \_\_\_\_\_

Evening Telephone Number: \_\_\_\_\_

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**Scout submits Completed Form to Troop Advancement Chairperson for Recording**

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Date Received by Advancement Chair: \_\_\_\_/\_\_\_\_/\_\_\_\_

Service Credit Applied to Rank: TF 2C 1C STAR LIFE

Number of hours RECORDED / REQUIRED: \_\_\_\_ / \_\_\_\_