



**TWIN RIVERS COUNCIL
EAGLE SCOUT LEADERSHIP SERVICE PROJECT
SUMMARY FORM**



Congratulations! In order to preserve a record of your achievement in striving to attain the rank of Eagle Scout, the Twin Rivers Council Advancement Committee requests that you provide the information outlined below. This form will be retained by the council and may be used at future Scouting functions or in Scouting publications to help promote Scouting. Thank you for your help in maintaining this important record!

Name Unit District

Address Eagle Board of Review Date

City State Zip Code Home Phone

Name of Institution, Organization or Community for which the Eagle Project was done

Address of Institution, Organization or Community

Total Number of Service Hours performed on this project _____.

Please describe your project in a short paragraph: _____

Please attach a photograph that best illustrates what you accomplished for your Eagle Scout Leadership Service Project.

PLEASE NOTE

Although highly encouraged, submission of this form is not mandatory and should not be considered an additional requirement for the completion of the Eagle Scout Project.

Paste your project photo here.