

Date of service project:

Number of youth members participating in the project:

Number of youth who are not members participating in the project:

Number of adult leaders participating in the project:

Number of other adults participating in the project:

Total unit hours--including members and non-members

(ex. 10 people worked 2 hours=20 hours)

Which organization(s) did you partner with on the project?

Messengers of Peace	BSAdopt-a-School	U.S. Military Families
OA Lodge	Local food pantry	Local homeless shelter
Boy Scout Camp	Local blood bank	Local hospital/medical center
American Red Cross	Salvation Army	Habitat for Humanity
Dept. of Health	City	County
Meals on Wheels	Church	School
Other religious organization	Goodwill	Civic Organization
Retirement Center	Service Organization	U.S. Forest Service
National Park	Other_____	no partner

What is the name of the local organization you worked with?

Briefly tell us about your project: