

Boy Scouts of America Frontier District, LAAC



Checklist for Frontier District <u>Eagle Scout Project</u> Approval

Scout's Name:	Phone:	Unit #:
Scout's Name: District Reviewers:	and	Date://
 Preliminary: These MUST be complete Secure an appointment with the District Eagle Scout Dressed in full uniform Using Form 18-927E Eagle Scout Service Project Organize "typed" Eagle Scout Service Project Signature of representative from organization Signature of Scoutmaster or Unit Eagle Coord Signature of Unit Committee representative? (Project Review Chair? (Refer to FR Ac Workbook in pdf format published by NESA Workbook in a 3-ring binder? (<i>Unit Na</i> to benefit? (<i>Workbook page number 9 a</i> inator? (<i>Workbook page number 9 page</i>	 Iv. Committee on www.boyscoutsla.org) A? (Other format will NOT be accepted) b., Leader Name, etc., Workbook page 1) and page number 13 to be signed later)
 Project Description: Complete description of the project? Does the group to benefit qualify? Who will in Complete description of benefit provided to the 		
 Project Details: Complete description of the present conditions Methods used to complete the project: How will the project work be organized? How will the Scout demonstrate leadershi Materials required for the project: Complete list of necessary materials? (Bree Where will the Scout secure the materials How much will the materials cost? 	p? eakdown of the materials and amount of each ? (Retail outlets, organizations, benefiting g	h needed) roup, etc.)
 How will funding to pay for the materials Resources required for the project: Complete list of all the resources necessar Where will the Scout secure the resources Project helpers (people) necessary to complete 	ry? (Tools, electricity, transportation, etc.) ? (Provided by self, friends, Scout unit, bend	
 Where does the Scout plan to get the peop List of the number of people needed and w Time schedule: Has the Scout set dates for working on the What are the contingency plans in case th Volunteer Sign in/Sign out sheet showing Time log including each contact, discussion 	ole? (Scout unit, friends, schoolmates, family when? (Schedule of personnel requirements e project, and are these dates realistic? e dates don't work out? (Inclement weather Name, Time in/Time out, Total Hours	based on project workload) er, missing materials, etc.) worked on project
 Safety considerations: Hazards involving the worksite, materials Availability of first aid supplies and access Who will provide water and food? (<i>Will worker</i> Are restroom and/or wash facilities available? Flyer (<i>Name, Phone number, Where, When, Brief</i> Tour Permit completed for signature? (If <i>project</i> Actions of the District Review Team: 	ss to emergency services? ss who neglect to bring water have access to (If not, do they need to be?) details of project, Map, What should volunte	it?) eers bring)
$\Box_{\text{Yes}} \Box_{\text{No}}$ Project approved? (If not, ensure S	cout has a complete understanding of w	what he needs to add or change)

Yes No Follow-up date selected if the project approval is pending on additional information to be provided