



EAGLE SCOUT/GOLD AWARD APPLICATION

Applicant Information	
Name:	
Address:	
Phone Number:	
Email:	
Grade in School:	
Birthdate:	

Parent/Guardian Information	
Name(s):	
Address:	
Phone Number:	
Email:	

Troop/Pack Information	
Troop or Pack #:	
Leader's Name:	
Leader's Phone Number:	
Leader's Email:	

Project Information	
Name of Project:	
Explain Project in Detail:	
Proposed Starting Date:	
Proposed Ending Date:	
Approved by Pack Leader:	
Does this project pose any safety concerns? Who is going to monitor the safety of the project? Who will provide safety equipment if needed? <i>*Please note: the City may require insurance based on the scope of the project</i>	

Funding Information (Cost Analysis)	
Estimated Project Cost:	
Estimated Amount from Fundraisers/Donations:	
List materials, tools, and supplies needed to complete the project.	

Agreement/Signatures

By signing below, I agree that I have read and am aware of the requirements to obtain my Eagle Scout/Gold Award from the Boy Scouts of America/Girl Scouts of the USA. I understand that if volunteers are required for the project that I will be responsible for recruiting, communicating and providing all information/documents to them. I understand that if my project is approved I will need to sign a waiver, hold harmless, release of liability and may need to provide additional insurance.

Applicant Signature:	
Parent/Guardian Signature:	
Troop/Pack Leader Signature:	