

Checklist for Lake Sands District Eagle Scout Project Approval

Scout's Name _____ Phone: _____ Unit : _____
 District Reviewers: _____ And _____ Date : _____

Eagle Project Checklist

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PRELIMINARY

| | | | |
|---|--------------------------|--------------------------|--------------------------|
| Scout Dressed in Class A ? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Using Eagle Scout Service Project Workbook | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Signature of organization representative to benefit | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Signature of scoutmaster or unit Eagle coordinator | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Signature of unit committee representative | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

DESCRIPTION

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|--|--------------------------|--------------------------|--------------------------|
| Complete Description of Project ? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Does the group to benefit qualify? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Who will benefit indirectly ? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Complete Description of Benefit provided to group? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

PLANNING

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|--|--------------------------|--------------------------|--------------------------|
| Complete Description of Present Conditions? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Present Pictures, maps, drawings | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Forecast for Time Expected | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Forecast for Money Needed | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Funds Raising Plan (Donations, Groups) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Organization Plan (subtasks, sequence) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Forecast for People Needed | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| People Skills, and when | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Forecast for Resources Needed | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| (Tools, Equipment, electricity, Water, snacks) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Preliminary Materials List | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Plan to Acquire Materials, Transportation | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Cost per Material | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Extra funds, or not enough funds | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

PURPOSE

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|---------------------------------|--------------------------|--------------------------|--------------------------|
| Benefits the Community | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Beneficial to Scouting | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Consistent With Scouting Ideals | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Scout has Passion for Project | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

SAFE SCOUTING

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|---------------------------------------|--------------------------|--------------------------|--------------------------|
| Utilities | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Power Tools | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Other Hazards? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Weather | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Worksite | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Water and Food ? Time of Year | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Emergency Plan and First Aid Kit | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Rest room and wash/cleanup facilities | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

MISCELLANEOUS

| | | | |
|-----------------------------|--------------------------|--------------------------|--------------------------|
| Original Idea for the Scout | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Journal, Logbook Started | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Guide Sheet

Contact Sheet
Receipt Record Keeping

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LEGALITIES AND REGULATIONS

City
County
State
Federal Government

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GENERAL GUIDES

Leadership Plans – Directing, Coaching, Listening
Size of Project
How will the Scout Demonstrate Leadership ?
Leadership Models – Democratic, Autocratic,
Laissez Faire

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PROJECT APPROVAL

Project Approved
Copy of Project Workbook and attachments

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