



BOY SCOUTS OF AMERICA
TROOP # 175
JOLIET, ILLINOIS

AUTHORIZATION FOR SERVICE PROJECTS

Scout Name: _____ Date: _____

Current Rank: _____

Proposed Activity for Service Hours:

Approved / Not Approved (Circle One)

Service Project Chairperson _____ Date _____

Scoutmaster _____ Date _____

Description of Activity: _____

Date(s) Service Project Performed: _____

Supervising Adult _____ Date _____

Comments: _____

