

EAGLE SCOUT QUESTIONNAIRE

Pages 1-2 to be filled out and completed by Eagle Scout Candidate before the start of the BOR.

DISTRICT: Blue Hills / Clear Water / Timber Rivers
Circle One

Board of Review Date: _____

Personal Information:

Eagle Scout's Name: _____ Phone: (____) _____

Address: _____ City: _____ State: _____ Zip: _____

Date of Birth: _____ Year Turns 18: _____ Troop #: _____

Mother: _____ (____) _____
First Name Last Name Telephone if different from Scout's

Father: _____ (____) _____
First Name Last Name Telephone if different from Scout's

Scouting Background:

of Merit Badges Earned: _____

Scout Leadership Positions Held: _____

OA Member: YES / NO

NYLT: YES / NO If Yes, what year: _____ If NYLT Staff, what year(s): _____

of Summers Camping at L.E. Phillips Scout Reservation: _____ (Boy Scout Camp and Cub World)

Have You Been a Camp Staffer: YES / NO If Yes, what Year(s): _____, _____, _____

Staff Position(s): _____

Eagle Project Information:

Beneficiary: _____

Brief project description: _____

Eagle Candidate's hours: _____ + Work crew hours: _____ = Total hours: _____

Helpers: # BSA adults _____ # non-BSA adults _____ # Scouts _____ # other youth _____ Total _____

Estimated Total Cost: \$ _____

Funding sources: _____

Special Scouting Awards:

_____ World Conservation _____ 50 Miler _____ Mile Swim _____ BSA Lifeguard

_____ Religious (list) _____

_____ National Life Saving/Meritorious

Other _____

Major Scouting Activities:

- _____ National Jamboree
- _____ World Jamboree
- _____ Philmont
- _____ Sea Base
- _____ Northern Tier
- _____ High Adventure

Other _____

Community Volunteer and Other Activities:

- _____ Religious Awards
- _____ Choir
- _____ Church Server
- _____ Food Pantry
- _____ Humane Society
- _____ 4H

Other _____

School:

Name of High School	City	Grade	Current GPA
School Clubs:	_____	_____	_____
Sports:	_____	_____	_____
Honors:	_____	_____	_____
Letters:	_____	_____	_____
Offices Held:	_____	_____	_____
Academic Teams	_____	_____	_____
Other:	_____	_____	_____

Employment: (Paid Work)

Name of Employer / Business
Name of Employer / Business

Information from the above biography may be used to recognize the Scout on social media and/or Council publications. By signing below, you approve the use of the above information.

Scout's signature _____

For Scouts under age 18:

Parent/Guardian Name: _____ Parent/Guardian Signature: _____ Date: _____