Journey to Excellence

Service Project Reporting Form

Unit Type: Pack / Troop / Crew / Ship / Team / Post		Unit Number:	
Reporting Leader's Name:		Phone Number/Email:	
Type of Service Pro	ject (Circle One):		
Food ◆ Food Collection ◆ Meal Delivery ◆ Serving Food	Home Repair/Maintenance	 Healthy Living Blood Drive Fun Run/Walk/Hike/Cycle Bike Safety Event Child Fingerprinting Health Fair/Fitness Expo CPR Training Tree Planting Litter Cleanup/Beautification 	Military SupportNational Park Resource StewardshipOther
Date of Service Proj	ect:		
Number of youth me	embers participating in the project	<u>:</u>	
Number of youth wh	o are not members participating	in the project:	
Number of adult lead	ders participating in the project: _		
Number of other adu	ults participating in the project:		
	cluding members and non-memb e worked 2 hours = 20 total unit h		
Which of the following	ng organization(s) did you partne	r with on the project?	
 Habitat for Humanity Salvation Army U.S. Department of Health Local Food Bank/Pantry Local Shelter for the Abused Local Blood Bank Meals on Wheels Local Medical Center/Hospital County County Mosqu Other School Retires Goody 		ch gogue ue Religious Organization ol ement Center will Industries Organizations vith on this project:	
Briefly tell us abou			