



Girl / Boy Scout Project Form

Scout Name: _____ Date: _____

Scout Address: _____

Scout Troop # _____ Scout phone# _____

Scouts email: _____ Scouts Signature: _____

What type of a project are you looking to do? _____

Silver ____ Gold ____ Life ____ Eagle ____ Community ____ Other ____

How soon are you looking to begin your project?

1 month ____ 1-3 months ____ 3-6 months ____ 6 months to 1 year ____

Two requirements we require:

1) Is that you're able to complete your project within 6 months from the point of agreement.
Are you able to complete your project within this timeline Yes ____ No ____?

2) Keep us updated by communicating to us at least monthly on the status of your project

Scouting Connection is a resource to help you get connected to open projects, as well as connect you to resources, agencies, non-profits, and/ or others to help you earn scouting awards.

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Lehigh Valley Business Group has developed a reputation and has built key relationships throughout our community with an array of local businesses, organizations, community leaders, and others who enjoy working with us to help others