# Boy Scout Troop 428

# Service Hours Verification

This form is to be used when a Scout wants to work on service hours that are completed on his own that are not part of a Troop or Eagle Project.

Examples: Church, health fair, school, volunteer work at a non-profit organization, etc.

You must obtain approval from the Scoutmaster or an Assistant Scoutmaster **BEFORE** beginning your work. The person verifying the hours completed cannot be a parent of the scout and must be an adult. Once the service hours are completed return the form to one of the people mentioned above for final approval. Keep a copy for yourself.

**Scouts Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Rank Service Hours are for: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Organization you are helping: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Organization Contact Person: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Organization Phone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Scoutmaster Approval: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Record of Actual Service Hours**

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| --- | --- | --- |
| **Date(s) Service Hours Completed** | **Number of Hours Worked** | **Person Verifying Hours** |
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| **Total Number of Hours Completed** |  |  |