



Service Hour Authorization Form

(To be filled out for service hours outside of Troop events)

Scout Name: _____

Date of Service: _____

Type of Service: Community Conservation

Patrol Activity: Yes or No If yes, Patrol Name: _____

Are these hours for a Merit Badge: Yes or No If yes, list MB: _____

Event Name: _____ Total of Hours: _____

Person Overseeing Event Signature: _____

Give a brief description of service completed. Please attach any documentation.

**If a patrol activity, list all scouts that took part.*

When completed take to Scoutmaster or Assistant Scoutmaster for Approval. Then turn into Service Chair for entry into Advancement.

SM/ASM Approval: _____

Date: _____

Date entered in Advancement: _____