



**Scouting Award Projects
Hours Reporting Form**

Full Name:	Preferred first name:
Address:	
City/Zip Code:	Troop number:
Home phone:	Scout Master (leader) Name:
Email address:	Scout Master (leader) Phone:

Complete this information and return to the Volunteer Resources Office (see below)

Project Record

Park supervisor	
Park name	
Description of completed project	
Date of project completion	
Donations of materials (record dollar value)	
Total hours worked by Scout	
Total number of additional volunteers involved (record on side two of this form)	
Total hours worked by additional volunteers	
TOTAL VOLUNTEER HOURS FOR PROJECT	

Three Rivers Park District Volunteer Office
Volunteer@ThreeRiversParks.org | 763-559-6706
 3000 Xenium Lane N
 Plymouth, MN 55441
www.ThreeRiversParks.org/volunteer



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Project Volunteers			
Name	Address/City/Zip	Phone Number	Hours Worked

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