

## **Oconee District Eagle Scout Project Process**

1. Proposed Eagle Scout Project must have approval of the Unit Leader, Unit Committee and the benefactor of the project before contacting the District Eagle Board Chairman. (BSA Advancement Committee Guide p27)
  - Without having the Unit Leader and Unit Committee approval the District Eagle Board Chairman will not sign the workbook until unit approval is received.
2. Have the scout contact the District Eagle Board Chairman (864-710-6673) Lyle Belcher for review and project approval. I will set up an appointment with the scout to review his workbook.
  - I am a firm believer that the Life Scout should make the contact to the District Eagle Board Chairman once local approval is received. The Life Scout at this point should continue to take full responsibility for his project and his leadership responsibilities.
3. If the District Eagle Board Chairman approves the project then the Life Scout may go ahead with his project. Without approval of the District Eagle Board Chairman no work is allowed to be done.
  - The District Eagle Board Chairman will review the package with the scout. Also the District Eagle Board Chairman may visit the site where the project will be carried out.
  - In some cases it may not be possible to meet with the scout because of other commitments or be unable to look at the site where the project will be conducted. In this case the District Eagle Board Chairman may give a verbal approval. (This is in rare cases and will not be the normal practice.)
4. If the District Eagle Board Chairman disapproves the project then the causes or reasons will be discussed with the Life Scout and may not proceed with his project at that time.
  - Discuss causes or reasons with scout, the project may be too weak or just need some additional improvements. A new concept may have to be developed. If so, the project may be required to be approved at the local unit again. Improve and re-submit.
5. The District Eagle Board Chairman will keep the scoutmaster informed on all projects disapproved (if disapproved specific reasons will be identified). If your unit has a specific person in your troop for eagle projects please let me know and I can also keep that person informed.

**Oconee District**  
**Eagle Scout Board of Review Process**

1. The Board of Review (BOR) for Eagle should convene at least 15-30 minutes prior to the Eagle candidate appears in order to review the application (checking on dates) and to ensure it is completed correctly, review reference checks (letters of recommendation), and reviewing the Eagle Service Project Report.
2. If more than one District member is needed for the Eagle Board please let the District Eagle Board Chairman know.
3. If the Unit Leader remains in the room during the BOR they are reminded they are only there to clarify a point in question **when called upon**. In addition, after the questioning is over the Eagle candidate and the Unit Leader is required to leave the room while the board members discuss the acceptability of the candidate as an Eagle Scout.
4. After the Board Of Review the Unit Representative is responsible for processing through the local council office:
  - Eagle Scout Rank Application
  - The statement of the Scout ambitions and life purpose

# Eagle Scout Application

**PID No.**  
(Required)

**EAGLE SCOUT RANK APPLICATION**

TO THE EAGLE SCOUT RANK APPLICANT. This application is to be completed after you have completed all requirements for the Eagle Scout rank. Print in ink or type all information. List the month, day, and year for all dates. When using computer date blocks list the date: July 8, 1970, as 07 (for July) 08 (for day) 70 (for year). When you have completed this application, sign it and submit it to your unit leader.

FOR COUNCIL USE ONLY	
COUNCIL NO.	TYPE OF UNIT
REGION C, N, S, W	NATIONAL NO.
NAME ON OFFICIAL REGISTRATION	

**LIST YOUR FULL LEGAL NAME (UP TO 30 CHARACTERS ONLY).**

Street or R.F.D. Address \_\_\_\_\_  
 City, State, Zip \_\_\_\_\_  
 Telephone (Including area code) \_\_\_\_\_  
 Troop, Team, Crew, or Ship \_\_\_\_\_ Local No. \_\_\_\_\_  
 City, State, Zip \_\_\_\_\_

Date joined a Boy Scout troop \_\_\_\_\_  
 Date became a Varsity Scout \_\_\_\_\_  
 Date became a Venturer \_\_\_\_\_  
 Date of First Class Scout board of review \_\_\_\_\_  
 Date of Star Scout board of review \_\_\_\_\_

Month	Day	Year

Were you a Cub Scout?  Yes  No  
 Were you a Webelos Scout?  Yes  No  
 Did you earn the Arrow of Light Award?  Yes  No  
 Had you completed fifth grade upon joining?  Yes  No

- All Information Is Legible
- Applicant's Full Legal Name
- Applicant's Social Security Number
- Date Joined Boy Scouts Entered
  - 11 Yr Old, Completed 5<sup>th</sup> Grade, Earned Arrow of Light
- First Class Board of Review Date
- Star Board of Review Date Entered
  - 4 Months after 1<sup>st</sup> Class BOR Date

conducted more than six months after a candidate's 18th birthday.

A Scout or Venturer with a disability may work toward rank advancement after he is 18 years of age. See *Advancement Committee Policies and Procedures* for details.

**REQUIREMENT 1.** Be active in your troop, team, crew, or ship for a period of at least six months after you have achieved the rank of Life Scout.

Date of birth \_\_\_\_\_  
 Month Day Year

Date of Life Scout board of review \_\_\_\_\_  
 Month Day Year

- Life Rank Board of Review Date
  - 6 Months After Star BOR Date

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Please fill out the following form. You cannot save data typed into this form. Please print your completed form if you would like a copy for your records.

**REQUIREMENT 2.** Demonstrate that you live by the principles of the Scout Oath and Law in your daily life. List the names of individuals who know you personally and would be willing to provide a recommendation on your behalf.

Name	Address	Telephone
Parents/guardians	_____	_____
Religious	_____	_____
Educational	_____	_____
Employer (if any)	_____	_____
Two other references	_____	_____

**REQUIREMENT 3.** Earn a total of 21 merit badges (required badges are listed). List the month, day, and year the merit badge was earned.

MERIT BADGE	DATE EARNED	UNIT NO.	MERIT BADGE	DATE EARNED	UNIT NO.	MERIT BADGE	DATE EARNED	UNIT NO.
1 CAMPING			8 FIRST AID		15			
2 CITIZENSHIP IN THE COMMUNITY			*9 CYCLING OR HIKING OR SWIMMING		16			
3 CITIZENSHIP IN THE NATION			10 PERSONAL MANAGEMENT		17			
4 CITIZENSHIP IN THE WORLD			11 PERSONAL FITNESS		18			
5 COMMUNICATIONS			12 FAMILY LIFE		19			
*6 EMERGENCY PREPAREDNESS OR LIFESAVING		13			20			
7 ENVIRONMENTAL SCIENCE		14			21			

\*Cross out badges not earned. If a crossed-out badge was earned, it may be reentered in 13 through 21.

- 5 References (With Letters of Recommendation from Those Listed On Application)
- 21 Merit Badges Are Listed With Date and Unit Number on Each
  - Cross Out badges not earned when 2 or more are listed
  - 4 Eagle Required Merit Badges / 2 other Merit Badges before the STAR BOR Date
  - 3 Eagle Required Merit Badges / 2 other Merit Badges before the Life BOR Date
  - 5 Eagle Required Merit Badges / 5 other Merit Badges before the Eagle BOR Date

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**REQUIREMENT 4.** While a Life Scout, serve actively for a period of six months in one or more of the following positions of responsibility. List only those positions served after Life board of review date.

**Boy Scout troop.** Patrol leader, assistant senior patrol leader, senior patrol leader, troop guide, Order of the Arrow troop representative, den chief, scribe, librarian, quartermaster, junior assistant Scoutmaster, chaplain aide, instructor, historian, Venture patrol leader

**Varsity Scout team.** Captain, cocaptain, program manager, squad leader, team secretary, librarian, quartermaster, chaplain aide, instructor, den chief, Order of the Arrow team representative

**Venturing crew/ship.** President, vice president, secretary, treasurer, boatswain, boatswain's mate, yeoman, purser, storekeeper

Date of Life Scout board of review: [ ] [ ] [ ]  
Month Day Year

Position \_\_\_\_\_ FROM [ ] [ ] [ ] TO [ ] [ ] [ ]  
Month Day Year Month Day Year

Position \_\_\_\_\_ FROM [ ] [ ] [ ] TO [ ] [ ] [ ]  
Month Day Year Month Day Year

- Has Applicant Served At Least 6 Months in a Position of Responsibility between Life and Eagle Rank Board of Review and Prior to 18<sup>th</sup> Birthday (Look at Positions)

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**REQUIREMENT 5.** While a Life Scout, plan, develop, and give leadership to others in a service project helpful to any religious institution, any school, or your community. The project idea must be approved by your Scoutmaster and troop committee and by the council or district before you start. You must use the *Eagle Scout Leadership Service Project Workbook, No. 18-927, in meeting this requirement.*

Date project was completed: [Month] [Day] [Year]

**REQUIREMENT 6.** Attach to this application a statement of your ambitions and life purpose and a listing of positions held in your religious institution, school, camp, community, or other organizations during which you demonstrated leadership skills. Include honors and awards received during this service. Take part in a Scoutmaster conference with your unit leader.

Date conference was held: [Month] [Day] [Year]

**CERTIFICATION BY APPLICANT.** On my honor as a Scout/Venturer, all statements on this application are true and correct. All requirements were completed prior to my 18th birthday.

Signature of applicant \_\_\_\_\_ Telephone \_\_\_\_\_ Date [Month] [Day] [Year]

**UNIT APPROVAL** (personal signatures required)

Signature of unit leader \_\_\_\_\_ Telephone \_\_\_\_\_ Date [Month] [Day] [Year]

Signature of unit committee chair \_\_\_\_\_ Telephone \_\_\_\_\_ Date [Month] [Day] [Year]

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- Eagle Scout Service Project Completed Between Life and Eagle Rank Board of Review Dates and Prior to 18<sup>th</sup> Birthday
- Scoutmaster's Conference Date Entered and Before Applicant's 18<sup>th</sup> Birthday
- Applicant's Signature, Telephone Number, and Date on Application
- Unit Leader's Signature and Date on Application
- Unit Committee Chairman's Signature and Date on Application

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**BSA LOCAL COUNCIL CERTIFICATION.** According to the records of this council, the applicant is a registered member of this unit and all dates listed are correct.

Signed \_\_\_\_\_ Position \_\_\_\_\_ Date [Month] [Day] [Year]

**ACTIONS BY EAGLE SCOUT BOARD OF REVIEW.** The applicant appeared before the Eagle Scout board of review on this date and this application was approved.

Review date [Month] [Day] [Year] This date will be used on the Eagle Scout credentials.

Signature of board chairman \_\_\_\_\_ Signature of council/district board representative (if applicable) \_\_\_\_\_

8.50 x 11.00 in

Eagle Board of Review Signatures and Date on Application

## **Preparing for the Eagle Board of Review**

1. Get a good night sleep prior to your board
2. Uniform should be clean and neat, wrinkle free (does it need to be ironed), and all insignia should be up to date.
  - Check with your scoutmaster at least 1 week prior to your board if you are missing insignia or other parts
  - Wear your merit badge sash to the board with all merit badges attached
  - Wear a scout belt
  - A neckerchief and slide
3. You can be asked question in the following areas
  - Merit badges since life
  - Basic scout skills (camping, cooking, first aid, knots, etc.)
  - Know the Scout Oath, Law, Slogan, Motto, and Outdoor Code (All of these are fair game)
  - Be prepared to provide a brief about your Eagle Project (especially what you learned about working with people and getting a job done)
  - The leadership role you played within the Troop and other activities-what being a leader means and what are signs of being a good leader
  - Values learned in Scouting and how they can be applied to your adult life



## BOY SCOUTS OF AMERICA Eagle Scout Letter of Recommendation

*An Eagle Scout candidate must demonstrate that he lives by the principles of the Scout Oath and Law in his daily life. In this regard, the candidate has indicated that you know him personally, and that you would be willing to provide a letter of recommendation on his behalf. On the reverse of this letter, there is a copy of the Scout Oath and Law for your reference in preparing the letter. Please note that the contents of the letter will NOT be shown to or discussed with the candidate, nor with anyone not a member of the Eagle Scout Board of Review without your permission. Of course you are free to discuss the information with him if you so desire, but you are under no obligation to do so.*

Checking this box indicates my permission to return this letter to the Scout after his Board of Review.

Eagle Candidate's Name: \_\_\_\_\_ Your Relationship: \_\_\_\_\_

Length of time you have known the candidate: \_\_\_\_\_

Place an "X" in the column that best describes the candidate.

Is he:	Always	Usually	Frequently	Occasionally	Never	Unknown
Dependable						
Courteous						
Cheerful						
Faithful in his Religion						
Of Service to his School						
Helpful to his family						
Industrious						
A Leader						

Dear Eagle Board if Review:

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See additional attached pages

\_\_\_\_\_  
My Name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Telephone /E-mail