

Contact Information

Eagle Scout candidates should know who is involved, but contact information may be more important to unit leaders and others in case they want to talk to one another. While it is recognized that not all the information will be needed for every project, Scouts are expected to provide as much as reasonably possible. Approval representatives must understand, however, that doing so is not part of the service project requirement.

Eagle Scout Candidate **Full legal name == Firstname Middlename Lastname**

Name: Full legal name -- use "NMN" if no middle name		Birth date:	
Email address:		BSA PID number*:	
Address:	City:	State:	Zip:
Preferred telephone(s):		Life board of review date:	

* BSA PID No., found on the BSA membership card

Current Unit Information

Check one: <input type="checkbox"/> Troop <input type="checkbox"/> Team <input type="checkbox"/> Crew <input type="checkbox"/> Ship	Unit Number:
Name of District: Neuse River	Name of Council: Occoneetchee

Unit Leader Check one: Scoutmaster Varsity Coach Crew Advisor Skipper

Name:	Preferred telephone(s):
Address:	City: State: Zip:
Email address:	

Unit Committee Chair

Name:	Preferred telephone(s):
Address:	City: State: Zip:
Email address:	

Unit Advancement Coordinator (If your unit has one)

Name:	Preferred telephone(s):
Address:	City: State: Zip:
Email address:	

Project Beneficiary (Name of religious institution, school, or community)

Name:	Preferred telephone(s):
Address:	City: State: Zip:
Email address:	

Project Beneficiary Representative (Name of contact person for the project beneficiary)

Name:	Preferred telephone(s):
Address:	City: State: Zip:
Email address:	

Your Council Service Center **Copy this VERBATIM into your ESPP workbook**

Contact name: Tiffany Edmiston	Preferred telephone(s): 919-582-0065 / Tiffany.Edmiston@scouting.org
Address: 3231 Atlantic Avenue	City: Raleigh State: NC Zip: 27604

Council or District Project Approval Representative **Copy this VERBATIM into your ESPP workbook**

(Your unit leader, unit advancement coordinator, or council or district advancement chair may help you learn who this will be.)

Name: Jim Crawford	Preferred telephone(s): 919-349-2429
Address: 8121 Hawkshead Rd	City: Wake Forest State: NC Zip: 27587
Email address: enzyme.specialist.crawford@gmail.com	

Project Coach (Your council or district project approval representative may help you learn who this will be.)

Name:	Preferred telephone(s):
Address:	City: State: Zip:
Email address:	

ALL boxes on this page should contain information, or "N/A" if not applicable.