Youth Leadership Development Program Community Service Project Proposal Projects should need 5 YLDP Students and should be for 3 hours or more

| Name: | | Date: |
|--|---|---|
| Title of Project: | | |
| 1. | Community Service Project Location and address: | |
| 2. | Community Service Project date and time: | |
| 3. | Location Contact name, phone and email: | |
| 4. | Project plan has been discussed and approved by location contact: Yes No | |
| 5. | Project flyer (to include purpose, location, date & time, registration information etc.) created and turned into carol.ashworth@scouting.org for approval. | |
| | REGISTRATION BEGINS | |
| | a. | A jot form will be created to take registration for volunteers (YLDP Students), and a registration list will be emailed to you prior to date. |
| | Day of | service project |
| | b. | Registration sign in sheet available for YLDP Students attending |
| | C. | Each student has a clear understanding of their "job function" to assist in making the |
| | d. | community project a success The project is underway and complete |
| Important planning tips: | | |
| Have a plan for your volunteers. (YLDP Students) How many students will you need to make the service | | |
| project a success? Be specific about the community service project so all students will have an idea of | | |
| their duties once they arrive. Keep YLDP representative updated throughout your planning process and aware of any issues that may occur during the planning process. | | |
| I have reviewed my son/daughter's Community Service Project Proposal I give him/her permission to develop and participate in the project described above. | | |
| Parent/Guardian Signature: | | |

Student's Signature:

Signature of Approving YLDP Official: _____

All service project proposals are due before February 9 and all service project dates must be prior to March 1.