



THE EAGLE SCOUT ASSOCIATION OF GREATER ST. LOUIS
EAGLE PROJECT GRANT

To Be Completed by The Scout
Please print neatly and return to:

The Eagle Scout Association
P.O. Box 410436
Creve Coeur, MO 63141-0436

OR:

grants@stlesa.org

**ATTACH PDF COPY OF YOUR PROJECT PROPOSAL AND PROJECT PLAN OF
EAGLE PROJECT WORKBOOK**

**EAGLE PROJECT WORKBOOK MUST BE SIGNED BY THE UNIT LEADER, UNIT
COMMITTEE, BENEFICIARY AND DISTRICT**

INCOMPLETE APPLICATIONS WILL NOT BE CONSIDERED

Name of Scout: _____ Age: _____

Council: _____ District: _____ Troop Number: _____

Address: _____

City _____ State _____ Zip Code: _____

Date of Eagle Board of Review: _____ Date of Proposed Project: _____

Phone Number: _____ Email: _____

Amount Requested: \$ _____ Expected Total Expense: \$ _____