

Resource Stewardship Scout Ranger Program Activity Tracking Sheet

Scout's Name: Troop Name:			Girl So	couts®		
Date	Park	Park Contact	What I did	What I learned	Hours	
				Total Hours		
I certify that I personally worked on these projects or programs for the provided hours.			I certify that these hours accurately represent the work the participant conducted on the listed projects or programs.			
Scout's Signature:				Verifier's Signature:		
Date:			Date:			