

Paul Bunyan Award  
Susquehanna Council  
Record of completion of requirements

Scout's Name: \_\_\_\_\_ Troop: \_\_\_\_\_

Prerequisites. Study the *Scouts BSA Handbook* and the *Camping* merit badge pamphlet, and demonstrate to your Scoutmaster or other qualified person the ability to complete the requirements.

Record of completion for requirements.

1. Explain the most likely hazards you may encounter while using woods tools listed in requirement 5 and what you should do to anticipate, help prevent, manage, and respond to these hazards.

Date completed: \_\_\_\_\_

2. Show that you know first aid for injuries that could occur while using woods tools.

Date completed: \_\_\_\_\_

3. Earn the Totin' Chip.

Date completed: \_\_\_\_\_

4. Help a Scout or patrol earn the Totin' Chip, and demonstrate to them the value of proper woods-tools use.

Date completed: \_\_\_\_\_

5. Be familiar with the proper and safe use, maintenance and storage of woods tools including:

a. Axe Date completed: \_\_\_\_\_

b. Hatchet Date completed: \_\_\_\_\_

c. Loppers Date completed: \_\_\_\_\_

d. McLeod Date completed: \_\_\_\_\_

e. Pulaski Date completed: \_\_\_\_\_

f. Saw Date completed: \_\_\_\_\_

g. Shovel Date completed: \_\_\_\_\_

h. Pick Axe Date completed: \_\_\_\_\_

i. PryBar Date completed: \_\_\_\_\_

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6. Demonstrate proper use of four of the tools listed in requirement 5.

Tool \_\_\_\_\_ Date completed: \_\_\_\_\_

Tool \_\_\_\_\_ Date completed: \_\_\_\_\_

Tool \_\_\_\_\_ Date completed: \_\_\_\_\_

Tool \_\_\_\_\_ Date completed: \_\_\_\_\_

7. With unit leader approval and supervision, using woods tools, spend at least two hours doing one of the following conservation-oriented projects:

a. Clear trails or fire lanes for two hours.

Date completed: \_\_\_\_\_

b. Trim a downed tree, cut into four-foot lengths, and stack; make a brush with branches.

Date completed: \_\_\_\_\_

c. Build a natural retaining wall or irrigation way to aid in a planned conservation effort.

Date completed: \_\_\_\_\_

Counselor's signature: \_\_\_\_\_

Counselor's name (printed): \_\_\_\_\_

Date of completion of all requirements: \_\_\_\_\_