

## Scouting Opportunity Fund Camp Scholarship Application

Camp Scholarships may be awarded to Scouts who cannot attend camp without financial assistance. Camp Scholarships are provided through donations by concerned community groups, individuals, memorial funds, and donations to the council's Friends of Scouting Campaign. The Camp Scholarships are granted for Inland Northwest Council camps for **one half** of a camp fee or **less**. One program experience per applicant, either for Boy Scout / Cub Scout / Webelos Residential Camp or Day Camps. It is hoped the Scout, his family, and his pack or troop will work together to earn as much of the fee as possible. Scouting encourages boys to help earn their own way. The council provides the annual popcorn sale and spring fundraiser to help Scouts earn funds. Even if the Scout's unit does not sell popcorn, the Scout can do so individually.

All applications should be submitted **before the first Friday in May. Applications that are not received on time may not be considered.** Submissions will be reviewed and the applicants will be notified via mail by the third week of May.

**All applications must be completely filled out and signed by the Parent or Guardian, Unit Leader and Committee Chairman or the form will be returned back to the unit and will delay the review process.**

### **PART 1: (To be completed by the PARENT OR GUARDIAN.)**

#### **PLEASE LEGIBLY PRINT ALL INFORMATION**

Unit's District: \_\_\_\_\_

**Circle one:** Pack Troop Team Crew Unit # \_\_\_\_\_ Camp \_\_\_\_\_ Date of Camp \_\_\_\_\_

Scout's Name \_\_\_\_\_ Address \_\_\_\_\_

City / State / Zip \_\_\_\_\_

Parent or Guardian Name \_\_\_\_\_ Phone \_\_\_\_\_

Address (if other than Scout's) \_\_\_\_\_

Relationship to Scout \_\_\_\_\_

1. Family's before taxes monthly income? \_\_\_\_\_ 2. Number of youth in family? \_\_\_\_\_

3. How many years has this Scout been a member of Scouting? \_\_\_\_\_

- This includes Cub Scouts, Boy Scouts, and Venturing. If new, please write new.

4. Does this Scout have the ability and means to earn some money for Scouting activities? \_\_\_\_\_

a. Did the Scout participate in Popcorn sales last year? \_\_\_\_\_

b. Did the Scout participate in council's camp card sale this past year? \_\_\_\_\_

5. **Please list special situations indicating need.** (Example: a disability, one-parent family, ill health of parent, parent's loss of earnings). \_\_\_\_\_

6. Is this Scout enrolled in the school free or reduced lunch meal program? \_\_\_ No \_\_\_ Free \_\_\_ Reduced

7. The total fee for the camp we are applying for is \$ \_\_\_\_\_.

8. We can earn or pay the following amounts: Scout will pay \$ \_\_\_\_\_ Family will pay \$ \_\_\_\_\_

Unit will pay \$ \_\_\_\_\_

9. We are asking for a Camp Scholarship of \$ \_\_\_\_\_ (maximum 1/2 of camp fee).

10. On my honor as a Scout parent or guardian, all information on this form is correct.

**Signature of PARENT OR GUARDIAN:** \_\_\_\_\_ Date \_\_\_\_\_

(see reverse side)

*(Unit Leaders and Committee Chairman, please complete the backside of this form)*

**PART 2:** (To be completed by the UNIT LEADER AND COMMITTEE CHAIR.)**PLEASE LEGIBLY PRINT ALL INFORMATION****District:** \_\_\_\_\_

Unit Leader's Name \_\_\_\_\_ Address \_\_\_\_\_

City / State / Zip \_\_\_\_\_

Phone (Home) \_\_\_\_\_ (Business) \_\_\_\_\_

E-Mail \_\_\_\_\_

Committee Chair's Name \_\_\_\_\_ Address \_\_\_\_\_

City / State / Zip \_\_\_\_\_

Phone (Home) \_\_\_\_\_ (Business) \_\_\_\_\_

E-Mail \_\_\_\_\_

1. What is the Scout's current grade? \_\_\_\_\_ 2. What is the Scout's rank? \_\_\_\_\_

3. How active is this Scout in your group? \_\_\_\_\_

4. Did your unit run a Family Friends of Scouting campaign this year? \_\_\_\_\_ yes \_\_\_\_\_ no

5. Did your unit participate in the popcorn sale last fall? \_\_\_\_\_ yes \_\_\_\_\_ no

6. Did your unit participate in the council's spring Camp Card Sale? \_\_\_\_\_ yes \_\_\_\_\_ no

7. What is the Scout doing to help earn money for camp? \_\_\_\_\_

**Signature of UNIT LEADER\*\*** \_\_\_\_\_ **Date** \_\_\_\_\_**Signature of UNIT COMMITTEE CHAIRMAN\*\*** \_\_\_\_\_ **Date** \_\_\_\_\_

\*\* By signing, you certify the accuracy of this application and agree this Scout is in financial need.

**THIS AREA TO BE FILLED OUT BY AUTHORIZED BSA PERSONNEL ONLY**

INITIALS \_\_\_\_\_ DATE \_\_\_\_\_



APPROVED



DENIED



MORE INFORMATION REQUESTED