

SCHOLARSHIP APPLICATION - HIGH ADVENTURE & TRAINING

Applications are reviewed quarterly and must be submitted on the 1st of the Month (March, June, September, & December) to be reviewed later that same month. Scholarships will be awarded based on a portion of the total cost as posted on the registration website (the amount will vary based on event).

High Adventure/Training

Check One Below

<input type="checkbox"/>	Powderhorn	<input type="checkbox"/>	NOAC
<input type="checkbox"/>	Philmont	<input type="checkbox"/>	NAYLE
<input type="checkbox"/>	Sea Base	<input type="checkbox"/>	NYLT
<input type="checkbox"/>	Sea Badge	<input type="checkbox"/>	IOLS
<input type="checkbox"/>	Summit	<input type="checkbox"/>	SEAL
<input type="checkbox"/>	Wood Badge		
<input type="checkbox"/>	National Jamboree		
<input type="checkbox"/>	Training Centers		
<input type="checkbox"/>	Northern Tier		
<input type="checkbox"/>	Other:		

Personal Information

Name _____

Parent/Guardian Name: _____

Address _____

City, State, Zip _____

Adult Email : _____

Birth Date _____ Adult Cell Phone# _____

Unit Type & # _____ District _____ Rank/Position _____

High Adventure/Training Information (Event)

Event Name & Number: _____ Year Attending: _____

Already registered for the event w/ deposit? Yes or No

If Yes, provide event registration number: _____

Scholarship will only be awarded through active registrations

If No, you will need to register before the event scholarship can be applied

Reason for Scholarship

Financial Breakdown

Instructions: Add Lines B, C, & D (Total Available Contribution Toward Cost) Subtract Line E from A (Total Cost of Event = Amt. Of Scholarship requested.

- A. Total Cost of High Adventure/Training \$ _____
- B. Family/Individual Contribution \$ _____
- C. Scout's Earned Contribution \$ _____
- D. Unit, Chartering Organizations, Community or Civic Group Contribution \$ _____
- E. TOTAL AVAILABLE CONTRIBUTIONS (add lines B,C,D) \$ _____
- F. SUBTRACT LINE E FROM A= FINANCIAL NEED \$ _____

AMOUNT OF SCHOLARSHIP REQUESTED.....\$ _____

I affirm that I have a real need for this scholarship. I promise that I will do my best to complete the trip and/or all training course requirements. I understand that in the event that I am unable or unwilling to complete the trip and/or training course, I will be required to repay any scholarship monies received.

Signature: _____ Date: _____

Parent Signature: _____ Date: _____
(if applicant is under the age of 18)

Leader/Mentor Signature _____ Date: _____
(Only needed for youth applicants)

Form Completed By: _____ Date: _____
(if different than applicant/parent)

For Statistical Purposes Only

What was the date of your unit's Friends of Scouting (FOS) presentation? _____

Scout or Leader (with your unit) participated in the council fundraisers
Spring Sale? Yes or No / Fall Sale? Yes or No

What summer camp was most recently attend? _____ What year? _____

Applications are only to be submitted via email to ScholarshipGLFSC@scouting.org

Council Use Only

Amounted Awarded _____ Date Posted to Registration: _____

Approved By: _____

Approved Date: _____ Scholarship Fund Used: _____