

PROGRAM SCHOLARSHIP APPLICATION

The Denver Area Council, Boy Scouts of America, strongly believes "no youth shall be denied a program experience because of lack of funds." **However, every effort must be made by applicants to "earn their own way."**

Scholarship Procedures:

- Scholarships are only available for the Denver Area Council outdoor programs as listed below.**
- Only registered youth members of the Denver Area Council are granted scholarships.
- Full scholarships are not awarded.** Due to limited funds, (up to 25% of the total fee) are preferred. Only in **extreme** situations will more be awarded.
- Please fill out application completely.
- Return to Denver Area Council, BSA; Camping Department; 10455 W. 6th Avenue, Suite 100; Denver, CO 80215.
- Please submit request at least 30 days prior to the event. Scholarships **cannot** be given after attending the activity.

Name of Scholarship Recipient:

Name: _____ Date: _____

Check One:

Pack Troop Team Crew Unit #: _____ District: _____

Check One:

Race: Black Hispanic Caucasian Native American
 Asian Other _____

***This information for benefit of funding sources and statistical data.**

Scholarship Request For: (Check the program request is for)

- | | | |
|---|--|--|
| <input type="checkbox"/> Camp Cris Dobbins | <input type="checkbox"/> Big Horn (JLT) | <input type="checkbox"/> Hooked on Tahosa |
| <input type="checkbox"/> Camp Cortlandt Dietler | <input type="checkbox"/> Tahosa Challenge (COPE) | <input type="checkbox"/> Cub Scout Day Camp (Cub Scouts only) |
| <input type="checkbox"/> Tahosa Resident Camp | <input type="checkbox"/> OKPIK | <input type="checkbox"/> 3-Day <input type="checkbox"/> 4-Day <input type="checkbox"/> 5-Day |
| <input type="checkbox"/> Alpine Adventures | <input type="checkbox"/> Super Troop | <input type="checkbox"/> Magness Adventure Camp (Cub Scouts only) |
| <input type="checkbox"/> W.E.S.T. (Webelos Extreme Scouting Trek) | | Session Date _____ |
| Session Date _____ | | <input type="checkbox"/> Other: _____ |

Amount of Request: (Please check appropriate box)

25 % Other Amount* (Please specify) _____

* Scholarships amounts over 25% are only awarded in extreme situations. 100% scholarships are not available.

Cost of event: _____ Amount paid by Family _____ Amount paid by Unit _____ Amount Requested _____

(This form must be completed on both sides.)

Specific Reason for Scholarship Application (establish need): *please print legibly

Unit Leader's Signature Required

Committee Chairperson's Signature Required

Signature of unit leader and committee chairperson above verifies and approves need for scholarship.

What rank advancement(s) has Scout earned in past year? _____

These programs help fund your scholarship. Did applicant participate in either of the following?

Has the applicant received a Scholarship in past 6 months? Yes No
For what programs: _____

Did applicant participate in Camp Card Sales? Yes No
Did applicant participate in Popcorn Sales? Yes No
Other money-earning projects? (List project) _____

If not, reason why?

Approval/Status of this application will be mailed to the unit leader or committee chairperson. (Address listed below cannot be the applicant's.)

Please print information for the Unit Leader or Committee Chairperson:

Name: _____

Address: _____

City / State / Zip: _____

Email: _____ Phone #: _____

For Office Use Only

Amount

Approval

Date

All scholarships are approved through the Council Program Team.