



**BOY SCOUTS OF AMERICA**  
**MIDNIGHT SUN COUNCIL**  
FINANCIAL SCHOLARSHIP ASSISTANCE APPLICATION



Recognizing the need of some of our youth members for financial assistance to attend certain Scouting events, a limited financial scholarship fund has been developed to help as many deserving youth members as possible. The information requested below is confidential and is necessary to help determine the degree of need for each applicant.

**ALL INFORMATION MUST BE COMPLETED, OR THE APPLICATION WILL BE RETURNED UNACCEPTED.**

Funds are allocated to help youth attend day or resident camp on a limited basis.

Applications must be submitted prior to March 8<sup>th</sup> (or for new registered or crossover scouts 30 days prior to final payment being due) to the Midnight Sun Council Service Center, 1400 Gillam Way, Fairbanks, AK 99701.

**SCHOLARSHIP GUIDELINES**

1. All applicants will need to have fulfilled the following requirements: Participated in popcorn sales, family donated to FOS, and you will need to have 30 hours of recorded service hours. This can be accomplished using hours from unit, council, community, and the Order of the Arrow (**ONLY 20 HOURS ARE ALLOWED FROM Order of the Arrow service**)
2. All applications will be reviewed and approved or denied by the Midnight Sun Council Scholarship Committee, and the Scout Executive or designee.
3. The funds from this scholarship are only available for the Midnight Sun Council Camping programs only. These funds **are not** available for any other Council's camping program.
4. Scholarship funds once awarded are not transferable to another youth. If the youth that was awarded the funds does not attend camp, that scholarship is forfeited.
5. The Midnight Sun Council will only grant scholarships under **extreme hardships** for **up to 60%** of the program fees. **Normally, the maximum of 60% is not granted.**
6. Scholarship funds will only be paid by the Council prior to the final payment for camp. There are no reimbursements through scholarships.

CJ Stewart  
Director of Camping Services  
Midnight Sun Council – BSA  
1400 Gillam Way  
Fairbanks, AK 99701  
(907) 452-1976



**ALL INFORMATION MUST BE FILLED IN OR THE APPLICATION WILL BE RETURNED UNACCEPTED.**

YOUTH NAME: \_\_\_\_\_ AGE: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_, AK  
ZIP CODE: \_\_\_\_\_ HOME PHONE: \_\_\_\_\_ CELL: \_\_\_\_\_  
E-MAIL: \_\_\_\_\_ PACK/TROOP # \_\_\_\_\_

**ATTENDING WHICH CAMP:**

DAY CAMP: \_\_\_\_\_ CUB RESIDENT CAMP: \_\_\_\_\_ SCOUTS, BSA SUMMER RESIDENT CAMP: \_\_\_\_\_

**DATE OF CAMP:** \_\_\_\_\_

**PARENT INFORMATION:**

FATHER'S NAME: \_\_\_\_\_

FATHER'S EMPLOYER: \_\_\_\_\_

MOTHER'S NAME: \_\_\_\_\_

MOTHER'S EMPLOYER: \_\_\_\_\_

SIBLINGS NAMES (still living at home)

\_\_\_\_\_  
\_\_\_\_\_

State the specific financial need(s) which make it impossible for the entire fee for camp to be paid by the family.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**TOTAL YEARLY INCOME: Circle one Please**

\_\_\_ Under \$18,000 \_\_\_ \$18,001 - \$22,000 \_\_\_ \$22,001 - \$26,000 \_\_\_ \$26,001 - \$30,000

\_\_\_ \$30,001 - \$ 34,000 \_\_\_ \$34,001 - \$38,000 \_\_\_ \$38,001 - \$42,000 \_\_\_ \$42,000 - 46,000

\_\_\_ Over \$ 46,000

**CONTINUED THE BACKSIDE OF THIS FORM**

How much of the fee will be paid by the family: \$ \_\_\_\_\_

How much of the fee will be paid by the unit: \$ \_\_\_\_\_

How much of the fee will be paid by the Charter Organization: \$ \_\_\_\_\_

Did the youth participate in popcorn sales: YES \_\_\_\_\_ NO \_\_\_\_\_

Did the family contribute to the unit FOS Campaign YES \_\_\_\_\_ NO \_\_\_\_\_

You will need to have 30 hours of recorded service for use for the Resident Summer Camp and 10 recorded service hours for use for Cub Scout Programs: this can be accomplished using hours from;

**(PLEASE FILL IN THE HOUR AMOUNT IN WHICHEVER AREA)**

Unit: \_\_\_\_\_ Council: \_\_\_\_\_ Community: \_\_\_\_\_ and Order of the Arrow: \_\_\_\_\_

**(ONLY 20 HOURS ARE ALLOWED FROM the OA)**

We would like to request financial assistance in the amount of \$ \_\_\_\_\_

\_\_\_\_\_  
Parent/Guardian signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Unit Committee Member

\_\_\_\_\_  
Date

\_\_\_\_\_  
Cubmaster/Scoutmaster

\_\_\_\_\_  
Date

OFFICE USE ONLY:

EMPLOYEE ACCEPTING APPLICATION; \_\_\_\_\_

DATE RECEIVED: \_\_\_\_\_ AMT APPLIED FOR: \_\_\_\_\_ DATE REVIEWED: \_\_\_\_\_

APPROVED DATE: \_\_\_\_\_ AMOUNT RECEIVED: \_\_\_\_\_ DENIED DATE: \_\_\_\_\_

\_\_\_\_\_  
Scholarship Committee Member

\_\_\_\_\_  
Scout Executive or designee

