



**BOY SCOUTS OF AMERICA**  
**MIDNIGHT SUN COUNCIL**  
 FINANCIAL SCHOLARSHIP ASSISTANCE APPLICATION 2023



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 May 1<sup>st</sup> (or for new registered or crossover scouts 30 days prior to final payment being due) to [Linda.Hill3@scouting.org](mailto:Linda.Hill3@scouting.org) or dropped off at the council office.

### **SCHOLARSHIP GUIDELINES**

1. All applicants will need to have fulfilled the following requirements: Youth's unit participated in popcorn sales and the FOS campaign. Scouts BSA youth 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. Cub Scout must have participated in at least one community service project.
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 up to \$250**
6. Scholarship funds will only be paid by the Council prior to the final payment for camp. There are no reimbursements through scholarships.

Phil Burkett  
 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

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's unit participate in popcorn sales: YES \_\_\_\_\_ NO \_\_\_\_\_

Did the youth's unit participate in the FOS Campaign YES \_\_\_\_\_ NO \_\_\_\_\_

Scouts BSA youth will need to have 30 hours of recorded service for use for the Resident Summer Camp. Cub Scout youth must participate in one community service project: this can be accomplished using hours from;

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

Unit: \_\_\_\_\_ Council: \_\_\_\_\_ Community: \_\_\_\_\_ and Order of the Arrow: \_\_\_\_\_  
Cub Scout Community Service Project \_\_\_\_\_

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