



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. <u>ALL INFORMATION MUST BE COMPLETED, OR THE APPLICATION WILL BE RETURNED</u> <u>UNACCEPTED</u>.

Funds are allocated to help youth attend day or resident camp on a limited basis. Applications must be submitted prior to May 1st (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.

6. Scholarship funds will only be paid by the Council prior to the final payment for camp. There are no reimbursements through scholarships.

Matt Banaszewski 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:	CELI		
			ACK/TROOP #	
	ATTENDIN	G WHICH CAMP:		
DAY CAMP:	CUB RESIDENT CAME	COUTS, BSA SUMN	MER RESIDENT CAMP:	
	DATE OF CAMP:			
	PARENT]	INFORMATION:		
FATHER'S NAME:				
MOTHER'S NAME:				
MOTHER'S EMPLOYE	ER:			
SIBLINGS NAMES (sti				
State the specific financial	need(s) which make it impo	ossible for the entire fee for a	camp to be paid by the family.	
TOTAL YEARLY INCO	ME: Circle one Please			
		\$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	n of the fee will be j	paid by the family: \$		
How much	n of the fee will be	paid by the unit: \$		
How much	n of the fee will be j	paid by the Charter Organi	zation: \$	
			YES	NO
			YES	NO
		rs of recorded service for u Scout Programs: this can		ident Summer Camp and 10 recorded ed using hours from;
	(PLEAS	E FILL IN THE HOUR A	MOUNT IN V	WHICHEVER AREA)
Unit:	Jnit: Council: Community: and Order of the Arrow: (ONLY 20 HOURS ARE ALLOWED FROM the OA)			
	(ONLY 20 HOURS ARE	ALLOWED I	FROM the OA)
We would		ncial assistance in the amo	unt of \$	Date
Unit Committee Member				Date
Cubmaster/Scoutmaster				Date
	JSE ONLY: EE ACCEPTING A	APPLICATION;		
DATE RE	CEIVED:	AMT APPLIED FO	DR:	_ DATE REVIEWED:
APPROVI	ED DATE:	AMOUNT RECE	EIVED:	DENIED DATE: