

# CVC      Application for Financial Assistance      BSA

## Both sides of form must be filled out completely or it will not be considered!

Financial assistance is available for Cub Scouts, Boy Scouts, Venturers and Explorers who wish to attend the L.E. Phillips Scout Reservation. The Council Outdoor Committee will make every effort to honor requests, however, funds are limited.

### Financial Assistance Guidelines.

1. The youth must be a registered member of the Boy Scouts of America and reside in the jurisdiction of the Chippewa Valley Council.
2. There must be a demonstrated need for assistance. Reasons why this camp fee can not be afforded must be stated.
3. The youth's family and/or unit must be prepared to pay at least 70% of the fee.
4. The deadline for submission is April 1st. The form must be filled out completely or it will not be considered.
5. All information provided is kept confidential.
6. Gold Card does not apply to campership money or money paid by Scouts.
7. Assistance can be granted only once in a twelve month period to a scout.
8. High Adventure assistance granted will be no more than 30% of the scout camp fee.

## Scout Information

Please print legibly

Youth's Full Name \_\_\_\_\_ Grade in the fall \_\_\_\_\_

Street Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone Number \_\_\_\_\_ Currently registered \_\_\_\_\_ Yes \_\_\_\_\_ No \_\_\_\_\_ Unit # \_\_\_\_\_

Parent's/Guardian's Name \_\_\_\_\_

Parent's/Guardian's Phone Number's (work) \_\_\_\_\_ (home) \_\_\_\_\_

Size of family: Youth \_\_\_\_\_ Adults \_\_\_\_\_ Is parent/guardian employed? \_\_\_\_\_ Yes \_\_\_\_\_ No \_\_\_\_\_ Full time \_\_\_\_\_ Part time

If spouse, is spouse employed? \_\_\_\_\_ Yes \_\_\_\_\_ No \_\_\_\_\_ Full time \_\_\_\_\_ Part time

Family Income Range:

\_\_\_\_\_ less than 10,000      \_\_\_\_\_ 10,000 - 15,000      \_\_\_\_\_ 15,000 - 20,000      \_\_\_\_\_ 20,000 - 25,000      \_\_\_\_\_ 25,000 and up

Specific reasons for assistance, not simply that the fee can not be afforded.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Assistance requested for:      Cub Resident Camp      Webelos Camp      Boy Scout Camp  
(check one program only)

\_\_\_\_\_ High Adventure      \_\_\_\_\_ Junior Leader Training

### Assistance Needed

Amount the family will pay \$ \_\_\_\_\_

Amount the youth will pay \$ \_\_\_\_\_

Amount the unit will pay \$ \_\_\_\_\_

Total available funds \$ \_\_\_\_\_

Amount of camperships requested \$ \_\_\_\_\_

### OFFICE USE ONLY

Date Received \_\_\_\_\_ Date Reviewed \_\_\_\_\_

Amount approved \$ \_\_\_\_\_

Council approval by \_\_\_\_\_

Letter of Approval sent to unit leader \_\_\_\_\_  
(date)

Parent/Guardian Signature \_\_\_\_\_

**OVER FOR UNIT LEADER APPROVAL**

## Unit Leader must complete this side of form

Based on your knowledge of the family, do you think assistance should be granted?

\_\_\_\_\_ Yes \_\_\_\_\_ No If yes, explain:

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Has the youth been active with the unit? (participation in unit meetings and activities), please explain:

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Has the youth demonstrated initiative to earn money to help pay for any of his/her activities? If yes, explain:

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Unit Leaders Approval \_\_\_\_\_  
(signature)

Name \_\_\_\_\_  
(please print)

Street Address \_\_\_\_\_

City \_\_\_\_\_ Zip \_\_\_\_\_

Phone number: (W) \_\_\_\_\_

(H) \_\_\_\_\_