Philmont Scout Scholarship Application (2014 Contingent)

Cradle of Liberty Council believes that every Scout should be given an opportunity to take part in an outdoor experience. Scholarships have been established to assist Scouts who, without financial assistance, may not be able to attend Philmont.

Funding is limited and we ask only those with true needs to apply for a scholarship. Youth members are expected to earn their own way in Scouting and each unit should provide an opportunity for Scouts to participate in fundraising activities.

All applications are considered on the basis of need. Availability of scholarships changes year by year. Funding will be limited to no more than \$600, however may be less based on available funds. Completion of this application does not automatically guarantee a scholarship.

Other points to consider as you complete the application:

- Amount of request is **NOT** a guarantee of scholarship amount.
- Application must be approved by the Crew Advisor or Scoutmaster.
- All applications are considered on the basis of the information supplied please ensure you provide a detailed explanation (a paragraph) of need. "Financial hardship" is not a sufficient reason.
- Total amount awarded may be more or less than requested amount.
- The application MUST be submitted by December 1, 2013 to be considered. Applications received after this date will only be considered if funds become available.
- Scholarship decisions will be made by December 31, 2013.

Submit completed application for consideration to:

Cradle of Liberty Council, High Adventure Committee

1485 Valley Forge Rd

Wayne, PA 19087

OR

Email: tracy.launders@scouting.org

Scout Name:			Age on June 23, 2014:
First	Middle	Last	
Home Phone: ()	Parent Cell: ()		Parent 2 Cell: ()
Parent Work Phone: ()	Email Addres	ss:	
Membership ID #:	Council:		District:
Unit Type: (Indicate Troop or Crew)	Unit	Number:	·
Financial Estimates: Cost of Expedition: \$2,100			n (i.e. fundraising): \$
Scout Earned Contribution: \$	_ Family Contr	ribution: \$	
Amount of Scholarship Requested (To	tal Cost – Contributions	s = Financial	Need): \$
Descriptive Reason for Financial Need: Please try to be as specific as possible		ed.	
Crew Advisor OR Scoutmaster Signatu	re:		Date:
Crew Advisor OR Scoutmaster Phone N	Number: _()		
All applications must be received by D end of December 2013.	ecember 1, 2013 to be	considered.	Decisions and notifications will be made by
For Office Use Only:			
Scholarship Awarded: Yes	_No If Yes, amou	nt awarded:	\$ Type:
HA Committee Signature			Date