



TRAINING SCHOLARSHIP APPLICATION

Dear Scouts/Scouters/Parents and/or Guardians,

The Orange County Council Silver Beaver Alumni Association (SBAA) makes every effort to award financial aid for training opportunities when circumstances warrant it.

The vast majority of resources are dedicated to families with financial need. However, on a case-by-case basis depending on resource availability there may be a limited allocation based on merit. The SBAA Committee reviews each application in strict confidentiality and makes scholarship allocation decisions based on the information you provide in this application.

All families are strongly encouraged to check their local community agencies for scholarships in addition to those that may be provided by the SBAA. Many organizations offer scholarships for youth educational and leadership experiences. These include Faith Based Organizations, fraternal organizations, (VFW, ELKS, F&AM, LIONS, Troop, etc.)

Scholarship applications must be properly completed. They must be submitted to the Orange County Council SBAA no later than three months prior to the training or program. Applications can be submitted via fax or email or can be delivered to the Orange County Council Volunteer Service Desk.

Please note that all scholarship applications require submission of the family’s combined annual income. Scholarship decisions cannot be made without the statement of family income.

For any additional scholarship questions, please contact the SBAA Scholarship Committee.

APPLICANT INFORMATION

Applicant First Name:			Applicant Last Name:			Unit Type/Number:		
Home Address:						Unit Leader’s Name:		
City:		State:		Zip:		Unit Leader’s Phone:		
Applicant’s Email:					District:			
Parent Name:				Parent Email:				
Parent Home phone:				Parent Cell phone:				

FOR OFFICE USE ONLY

Date Received:		Received By:			Scholarship Award:		
Reviewed By:			Approved By:			Need:	
						Merit:	
Payment Or Council Credit		Council Check <i>(Check one)</i> Processed		Date Processed:		Processed By:	
<input type="checkbox"/>		<input type="checkbox"/>					

TRAINING/PROGRAM FINANCIAL REQUEST INFORMATION

Training/Program Name:	Youth: Current High School or Jr. HS Grade:
Listed Training/Program Fee:	
Estimated Transportation Fee:	+
Expected Family Contribution:	-
Other Scholarship Contribution:	-
Total Amount Requested:	=

Estimated annual family combined income:	
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SCOUT/SCOUTER SECTION TO COMPLETE - PLEASE ATTACH ADDITIONAL PAGES IF NEEDED

Please list all offices/positions/chairs held in Scouting and dates:
Please list other BSA training programs you have attended and dates:
How specifically will you and the BSA benefit by your attendance at this particular program?

PARENT SECTION TO COMPLETE - PLEASE ATTACH ADDITIONAL PAGES IF NEEDED

What are the reasons for requesting these funds? Please note any extenuating financial circumstances (medical, job loss, unusual expenses, etc) or significant family expenses, including college or day school tuitions.

DISCLAIMER AND SIGNATURE

By signing below, we are stating that the information outlined above is accurate, and that the amount of scholarship funds we are requesting is necessary in order for the applicant to be able to attend this training/program. We realize that funds for financial assistance are very limited and that receiving the full amount of funds requested is not guaranteed. In order to receive scholarship awards, participants must successfully complete the program, which means participants must attend, and complete the program without any disciplinary problems. Should the participant be sent home for disciplinary problems, the participant must reimburse SBAA for the amount of the scholarship award.	
Scout/Scouter Signature:	Date:
Parent Signature:	Date: