## Iroquois Trail Council Campership Application Instructions

The purpose of the Iroquois Trail Council Campership Fund is to provide assistance to families that are experiencing financial hardship so that their sons may participate in local Iroquois Trail Council summer camping activities.

- Campership funds are made available to assist those Scouts with an extraordinary financial need to experience an outdoor Scouting adventure.
- Camperships are intended to support and supplement other sources of funding, including funds earned by the Scout, his family, unit, charter organization and/or other sources.
- The Iroquois Trail Council believes that each Scout should contribute toward his/her camp fee. This policy also allows the council to utilize the limited funds to benefit the greatest number of individuals with demonstrated need.
- Except in extraordinary circumstances, **funding requests should be limited to 50% of the camp fee**. The Scout, his parents, local unit, and the Chartered Organization are responsible for the balance of the fees due.
- Awards are determined based on demonstrated need but are limited by the total amount of funds available to distribute in any given year.
- All information on the application is kept strictly confidential and is only shared with the Council's Campership Committee.
- Unit leaders will be notified of campership awards at the earliest practical date, which is expected to be late April.
- We desire that all campership awards be communicated with a minimum of publicity in order to avoid any potential embarrassment for recipients. Since typically the amount of requests exceeds the pool of available funds, there must be no promise made to applicants that they will receive campership support.

### **Eligibility Requirements**

To be eligible for campership funds, a youth must be:

- A registered member in good standing of an Iroquois Trail Council Pack, Troop, Crew, or Post.
- Able to demonstrate financial need.
- Attending a local Iroquois Trail Council summer camp activity (Cub Scout Day Camp, Cub Resident Camp at Sam Wood, Boy Scout Camp Dittmer, or National Youth Leader Training at Camp Dittmer).
- Recommended for consideration by the unit leader (certified by 'unit leader validation' section of the application). The unit leader must complete all information in the 'unit leader validation' section.
- Be sure to complete the application form in its entirety, including all required signatures. Incomplete applications will not be considered.
- Campership funds are awarded on an individual basis; as such they are not transferrable between Scouts.
- All applications for assistance must be submitted to the Iroquois Trails Council Service Center on or before March 10. Applications that are postmarked March 10 will be considered 'on time'.

# DEADLINE: March 10, 2017

### ALL SECTIONS MUST BE COMPLETED AND SIGNED. INCOMPLETE APPLICATIONS WILL NOT BE CONSIDERED.

### Iroquois Trail Council, Inc. <u>2017 Campership Application</u> Boy Scouts of America

#### Application Deadline: March 10, 2017 – Incomplete Applications Will Not Be Considered

Campership funds are made available to assist those Scouts with an extraordinary financial need to experience an outdoor Scouting adventure. Funds are available only for Scouts attending an Iroquois Trail Council Camp. Funds may be requested for up to 50% of the camp fee.

<u>All</u> information requested on this form <u>must</u> be completed for the Campership Application to be accepted for processing. <u>All information on this form is confidential.</u>

#### YOU MUST USE A SEPARATE FORM FOR EACH YOUTH AND EACH CAMP.

(Please Print) Scout's Name	Aae:	Pack/Troop/Crew#
Address	-	
County: Parent's en	nail address:	
Parent's Name	Pho	one ()
Will this Scout be attending any other cam If yes, please specify which camp		summer? 🛛 Yes 🗆 No
Has the Scout received an Iroquois Trail C	council Campership in the past? Ye	ear Amt. \$
Does this Scout participate in the school lu	inch program? 🛛 Yes 🗆 No	
Indicate in which Council Fundraising even		-
Does your Pack/Troop/Crew conduct a fun	draiser (s) with funds earmarked for	or summer camp? 🛛 Yes 🗖 No
Please specify type of sale	Amount Raised for car	mp: \$
What is your total household yearly gross i	income? \$	
Is any household income derived from soc Is the total household income exclusively fi (In certain circumstances, Social Services	ial service programs? □ Yes □ N rom Social Security or SSI? □ Ye	es 🗖 No
How many family members live in your hou	usehold: # Youth # Adults _	
Number of children attending Iroquois Tra	il Council camps this summer:	
Day Camp Cub Resident Camp Sam	Wood Boy Scout Camp Dit	ttmer NYLT at Dittmer
Financial assistance is requested because	:	
Parent/Guardian(s) currently unemple	oyed Parent/Guardi	an(s) under-employed
Medical Expenses	Large immedia	ate family with minimal income

Please describe briefly, but specifically, why a campership is needed. The explanation greatly influences the amount approved. Feel free to attach additional pages if necessary. This section <u>must</u> be completed.

Campership to be applied to: (CHECK ONE ONLY -	- YOU MUST USE SEPARATE FORM FOR EACH CAMP)	
Boy Scout Resident Camp at Camp Dittmer	Cub Scout Resident Camp at Camp Sam Wood	
National Youth Leader Training at Dittmer	Cub Scout Day Camp (any of the 3 Iroquois Trail Council Day Camps)	
Please refer to camp fees as detailed in each <i>Cal</i> Pack/Troop Leader and also online at <u>www.itcbs</u>	mp Leader's Guide. They are available from your a.org	
	(A) Camp Fee:	
Contribution from Scout & Family		
Commission from Council Niagara Candy Sale		
Anticipated Commission from Camp Card Sale		
Amount for Camp from other unit fundraisers		
Contribution from Pack/Troop/Crew		
Contribution from Chartered Organization		
Contributions (Other)		
	(B)Total Contributions & Payments:	
<u>Unit Leader Validation</u> (Required) Did your unit participate in the Council Popcorn Sale Did your unit participate in the Council Friends of Sc Does your unit arrange and encourage fundraising for If not, why? Has your unit provided financial assistance to this Sc	<ul> <li>couting fund raising campaign? □ Yes □ No</li> <li>or the Scout to earn his way to camp? □ Yes □ No</li> <li>Does this applicant participate? □ Yes □ No</li> <li>cout? □ Yes □ No</li> <li>tributions section above. Information entered? □ Yes □ No</li> <li>□ No</li> <li>□ Yes □ No</li> <li>✓ Yes □ No</li> <li>✓ S □ No</li> <li>✓ No</li> <li>○ No</li> </ul>	
<u>Signature of Unit Leader (</u> CM, SM, or CC) (Required) I certify that our unit committee has confi To the best of our knowledge the need reflected is a	Date irmed the circumstances described in this application. accurate.	
Please return to: Campership Committee, Iroquois Tra	ail Council, BSA, 201 East Main Street, Batavia, NY 14020	
0	Office Use Only	
Not Approved	— Hold — Date Received	
Approved	— Amount — Response sent	

Application Deadline: March 10, 2017