

**CAMP SCHOLARSHIP REQUEST FORM FOR TIDEWATER COUNCIL SCOUTS  
ATTENDING TIDEWATER COUNCIL DAY CAMPS AND CAMP LIONS RESIDENT CAMPS**

**APPLICATION DEADLINE, THIRD WEDNESDAY OF APRIL, of the Camping Year Requested**

To: The Camping Committee

Scout's Name, FIRST AND LAST NAME: \_\_\_\_\_

Telephone # of Scout: \_\_\_\_\_

Circle One: Pack Troop Team Crew Ship Post Unit # \_\_\_\_\_

Name and Telephone number of Charter Representative: \_\_\_\_\_

Scout will attend: (Circle One)

Cub Scout Day Camp; Wolf and Bear Resident Camp; Webelos Only Resident Camp; Boy Scout Summer Camp.

Financial Reason Scout needs scholarship (be specific) \_\_\_\_\_

*No Scholarships will exceed 40% of the fee for RESIDENT CAMP or 40% for Cub Scout Day Camp.*

*A maximum scholarship of 30% is possible for youth that received a campership in any prior year.*

*A maximum scholarship of 20% is possible for youth making a third or more scholarship request.*

*Request what you really need. Remember, all requests will be granted based on the total number of Scouts requesting funds.*

**To be eligible, the Units must have held a FOS presentation and participated in the Fall Popcorn Sale.**

To make sure that all sources of help have been considered, complete each line of the following. Do not mingle numbers-. Place zeros or amounts on each line.

Line A: Enter the fee of the program that this Scout is applying for: \$ \_\_\_\_\_

1. AMOUNT OF CAMP FEES SCOUT WILL EARN OR SAVE: \$ \_\_\_\_\_

2. AMOUNT OF CAMP FEES SCOUT'S FAMILY WILL PROVIDE \$ \_\_\_\_\_

3. AMOUNT OF CAMP FEES UNIT WILL PROVIDE: \$ \_\_\_\_\_

4. AMOUNT OF CAMP FEES CHARTERED ORGANIZATION WILL PROVIDE: \$ \_\_\_\_\_

5. Total of Lines 1 through 4: \$ \_\_\_\_\_

6. Subtract line 5 from line A—this is the amount of your scholarship request: \$ \_\_\_\_\_

**SINCE THE PREVIOUS CAMPING SEASON DID THE SCOUT PARTICIPATE IN? (Circle Answer)**

**POPCORN SALES (YES OR NO)**

**A FOS PRESENTATION (YES OR NO)**

SIGNED: \_\_\_\_\_  
Unit Leader or Committee Chairman      Print Name      Date

**MUST BE SIGNED BY THE EXECUTIVE OFFICER ONLY**

SIGNED: \_\_\_\_\_  
Executive Officer of Chartered Organization      Print Name      Date

**All Forms found to be defective will be returned for completion. Deadline will remain in force. All applications will be mailed to the Chartering Organization to be verified.**

**Submit this form to:  
Tidewater Council, Boy Scouts of America  
1032 Heatherwood Dr.  
Virginia Beach, VA 23455**