GREAT SALT LAKE COUNCIL
2013 NATIONAL SCOUT JAMBOREE SCHOLARSHIP APPLICATION

Send the completed form to the council office located at 525 Foothill Blvd., SLC, UT 84113 by December 1, 2012.
Please address it to the attention of **Doug Guest** and mark it "Personal and Confidential".
Note: Incomplete applications will not be accepted!

CONFIDENTIAL INFORMATION
Please print or type

APPLICANT'S INFORMATION

Name _____ Troop/crew number _____

Home address _____

City _____ State _____ Zip _____

Home telephone number _____ Birth date (MM/DD/YYYY) _____ Age _____

Name of parent or guardian _____

Council headquarters city _____ State _____

FINANCIAL NEED

What distinguishes your need from others and sets you apart? _____

_____

What have you done to date to raise funds? _____

EMPLOYMENT

Father/Guardian _____ _____
Employer Position

Mother/Guardian _____ _____
Employer Position

FAMILY SIZE

Please indicate the number of income tax dependents currently residing in your home:

☐ 8 or more ☐ 5-7 ☐ 4 or fewer

Ages _____

Total annual household income $ _____

☐ One parent household ☐ Two parent household

☐ One income family ☐ Two income family

AFDC/Welfare/Food Stamps/Foster Care Number _____

OTHER FACTORS

MEDICAL PROBLEMS:
(Please list any medical problems i.e., cancer, diabetes, disabilities, etc) that have affected your family and its financial status. (Broken bones, dental work, eyewear, orthodontic work, or normal medical expenses are not to be considered medical problems for the purpose of this application)

_____

_____

The amount requested from the scholarship fund is $_____

On my honor as a Scout/Venturer, all information and statements on this form are true and correct.

_____ _____
Signature of applicant Date

I have read this application and it has my approval.

_____ _____
Signature of parent/guardian Date

INFORMATION FROM THE UNIT LEADER/CREW ADVISOR (NOT A FAMILY MEMBER)

Name of leader/advisor_____Troop/crew #_____

Address_____

City_____State_____Zip_____

Daytime phone _____Evening phone_____

What is the Scout/Venturer's ethnic group:

☐ African American ☐ American Indian ☐ Asian ☐ Hispanic ☐ White ☐ Other_____

Describe and/or give examples of why the Scout/Venturer needs assistance: _____

_____

_____

Positive qualities the Scout/Venturer has demonstrated that illustrate the reason for being chosen to receive a scholarship:_____

_____

What are the Scout/Venturer's interests and future goals:_____

_____

_____

I have read this application and it has my approval.

_____ _____
Signature of leader/advisor Date

FOR COUNCIL OFFICE USE ONLY

Date application received _____ Membership verified: Yes ☐ No ☐

Application meets income guidelines Yes ☐ No☐ Application approved for $_____

Reason for denial (if any): _____

Signed by