

# CAMPERSHIP CREDIT APPLICATION

The Dan Beard Council, BSA promotes camping and does not want any Cub Scout, Boy Scout, or Venturer to miss the opportunity to attend a summertime camping program offered by our Council due to financial hardship.

“A Scout is Thrifty.” The Boy Scouts of America and the Dan Beard Council encourage all Scouts to pay their own way to Scouting activities, as this philosophy supports the basic aims of Scouting. However, we realize that some Scouts need a little extra help at times in order to participate. The Campership program is designed to aid Scouting families in these circumstances.

The campership program is funded by donors and the A&W Root Beer Float Sale conducted semi-annually by the Ku-Ni-Eh Lodge Order of the Arrow. These funds are specifically designated by our donors for use in assisting youth registered in the Dan Beard Council to attend Dan Beard Council camps.

We encourage Scouting units and families to help Scouts earn funds for camp. Here are some suggested methods for fundraising:

1. Sell Popcorn! The unit can allocate a portion of its commission to individual salesmen.
2. Organize a fund raising project to specifically assist youth attending camp. Each Scout should be given credit towards camp fees based on the amount of effort he puts into it.
3. Ask your chartered partner for support. Perhaps the Scout can perform special service or a work project in return for assistance.
4. Each Scout should be encouraged to save money on his own, e.g., birthday gifts, mowing lawns, shoveling snow, or other odd jobs.

If, after trying all of the above, the unit finds that a Scout still needs financial help, the Dan Beard Council Campership program will attempt to provide assistance. The unit leader or the unit Committee Chair must discreetly work with the family and carefully follow the procedure outlined below:

1. Verify with the family that there is a true need. Make sure that all other sources of funds have been exhausted before requesting campership assistance. Campership funds are very limited, and we are not able to meet all requests. We need your help to see that campership dollars are provided to those who most need assistance. Requesting funds for someone who doesn't truly need it may prevent another deserving Scout from receiving assistance.
2. A parent or unit leader must fill out the Campership Application (available in hard copy or online at [www.danbeard.org/camp](http://www.danbeard.org/camp)). The comments on each application will be treated as confidential and only members of the Campership Selection Committee will have access to this information. **The application must be filled out completely and signed by both the unit leader and the parent requesting assistance.** *Incomplete applications will not be processed.*
3. Applications must be signed and submitted to the Scout Achievement Center no later than Friday, April 15<sup>th</sup>, 2016. Submissions can be made by mail, fax or email.
4. Each application will be carefully and objectively reviewed by the committee, based solely on the degree of need as indicated on the form. Please be aware that the committee allows up to 50% funding for each application. A lesser amount may be given, subject to the total number of applications received and amount of funds available, which varies yearly.
5. Campership applications will be reviewed and approved by the Campership Committee on or near Wednesday, April 20<sup>th</sup>, 2016.
6. Notifications will be emailed to the unit leader listed on the application on or around Friday, April 22<sup>nd</sup>, 2016.
7. Once the unit leader receives the approvals, he/she is required to review the acceptance letter and make sure that the Scouts listed will be attending camp and using the Campership.
8. The unit leader will then submit the acceptance letters to the Scout Achievement Center no later than Sunday, May 1<sup>st</sup>, 2016 either by mail, fax or email.
9. If you feel you must deviate from this procedure for any reason, please contact the Outdoor Program Assistant via email at [camping@danbeard.org](mailto:camping@danbeard.org) to discuss this need. Alternate plans may only be approved by the Campership Committee.
10. Campership Credits will be applied to the Summer Camp Account prior to Sunday, May 15<sup>th</sup>, 2016.
11. If leader approvals are not received at the Scout Achievement Center by Sunday, May 1, 2016 credits will not be applied to the account.
12. If a cancellation is made for a Scout who received a campership, the amount of the campership will be deducted from the unit account and any refund due will be calculated based on the remaining fees due for camp.

## Income Eligibility Guidelines

Households with income less than or equal to the values below will be considered for a campership.

Family Size	Yearly	Monthly	Weekly
1	\$21,257	\$1,772	\$409
2	\$28,694	\$2,392	\$552
3	\$36,131	\$3,011	\$695
4	\$43,568	\$3,631	\$838
5	\$51,005	\$4,251	\$981
6	\$58,442	\$4,871	\$1,124
7	\$65,879	\$5,490	\$1,267
8	\$73,316	\$6,110	\$1,430

## Household Family Income Worksheet

Amounts are (check one)? Yearly Monthly Weekly

Be sure to include income from all family members

INCOME SOURCE	*AMOUNT
Wage, Salary	\$ _____
Social Security Income	\$ _____
Unemployment	\$ _____
Child Support (alimony)	\$ _____
Pension or retirement	\$ _____
Other	\$ _____
<b>TOTAL FAMILY INCOME</b>	\$ _____ (a)

FAMILY SIZE # \_\_\_\_\_ (b)

Enter values from lines (a) & (b) on the application form (next page)

# CAMPERSHIP CREDIT APPLICATION

A Campership is requested for:

**(Please complete one application per Scout requesting assistance and print information clearly)**

Scout First Name: \_\_\_\_\_

**Unit Type:** (Please check) Pack \_\_\_ Troop \_\_\_ Crew \_\_\_

Scout Last Name: \_\_\_\_\_

**Unit Number:** \_\_\_\_\_

Address: \_\_\_\_\_

**District:** (Please check)

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Ft. Hamilton \_\_\_ Hopewell \_\_\_ WHH \_\_\_ Maketewa \_\_\_

Age: \_\_\_\_\_ Birth Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Blue Jacket \_\_\_ US Grant \_\_\_ Hopkins \_\_\_ Trailblazer \_\_\_

Rank: \_\_\_\_\_

**Camp Attending** (Please check):

Phone: \_\_\_\_\_

Camp Friedlander: \$270 \_\_\_ 2 Day Adventure: \$70 \_\_\_

Email Address: \_\_\_\_\_

3 Day Adventure: \$120 \_\_\_ 4 Day Adventure: \$170 \_\_\_

**(Required, all communication is by email only)**

5 Day Adventure: \$110 \_\_\_ 5 Day Twilight: \$100 \_\_\_

Unit Leader First Name: \_\_\_\_\_

Date Attending Camp: \_\_\_\_/\_\_\_\_/2016

Unit Leader Last Name: \_\_\_\_\_

Session Number: \_\_\_\_\_ or Day Camp Location: \_\_\_\_\_

Unit Position: \_\_\_\_\_

Family Income: \$ \_\_\_\_\_ Family Size: # \_\_\_\_\_  
Line (a) from previous page Line (b) from previous page

Email Address: \_\_\_\_\_

Amount Requested: \$ \_\_\_\_\_

**(Required, all communication is via email only)**

**No more than 50% will be awarded for each Scout requesting assistance.**

**Briefly describe this applicant's Scouting history:** \_\_\_\_\_

**Briefly describe the financial situation on which this campership is based:**

**(Did the Scout participate in the Popcorn Sale?)** (Please Check) Yes \_\_\_ No \_\_\_ **Total Amount of Popcorn Sold:** \$ \_\_\_\_\_

**Completing a Service Project?** (Please Check) Yes \_\_\_ No \_\_\_

I acknowledge that the signed Campership application must be given to the unit leader for approval before Sunday, April 17<sup>th</sup>, 2016. The leader will sign and send the approved Campership application(s) to the Scout Achievement Center on or before Sunday, May 1<sup>st</sup>, 2016. All credits will be applied to the summer camp account on or before May 15<sup>th</sup>, 2016.

I will keep a copy for my records and the leader will bring a copy for review at camp (if necessary).

I acknowledge that the Campership(s) credits will not be given after attending camp.

Parent's Acknowledgement: \_\_\_\_\_  
Printed Name Signature

Leader's Acknowledgement: \_\_\_\_\_  
Printed Name Signature

## Office Use Only:

Date Received: \_\_\_\_/\_\_\_\_/2016

\* Recorded Date: \_\_\_\_/\_\_\_\_/2016

Amount Awarded: \$ \_\_\_\_\_ \* Approved By: \_\_\_\_\_

Date Approved: \_\_\_\_/\_\_\_\_/2016

Total Family Income: \$ \_\_\_\_\_

Not approved due to lack of information etc. per \_\_\_\_\_  
(Initials)

Email to Leader: \_\_\_\_/\_\_\_\_/2016

Approval by: \_\_\_\_\_

Approved Date: \_\_\_\_/\_\_\_\_/2016

