

Unit Application for Assistance

Oregon Trail Council, Boy Scouts of America
2525 Martin Luther King Jr. Blvd, Eugene, OR 97401
541-485-4433

District: _____ Date: _____

Pack Troop Post Crew Ship Number: _____

Amount: \$ _____

Scholarships are not transferable & have no cash value.
Application must be filled out in its entirety.

UNIT INFORMATION

UNIT LEADER OR COMMITTEE CHAIR: _____

ADDRESS: _____

CITY/STATE/ZIP: _____

HOME/CELL PHONE: _____ WORK PHONE: _____

TOTAL COST of event/supplies \$ _____ (provide documentation of costs)

MONEY SET ASIDE FOR THIS PURPOSE \$ _____ (subtract) – (provide unit budget)

COST PROVIDED BY UNIT FUNDRAISERS \$ _____ (subtract)

COST PROVIDED BY OTHER SOURCES \$ _____ (subtract) – (families/businesses)

NET SCHOLARSHIP REQUEST AMOUNT \$ _____

Explain the reason for the request and how it will benefit your entire unit.

FOR COMMITTEE USE ONLY

DATE: _____ AMOUNT: _____ INITIALS: _____ CERTIFICATE NUMBER: _____

UNIT INFORMATION

This section MUST be completed. List how many outings your unit goes on and how this money will relate to that. List all fundraising the unit participated (or will participate in) in this year, including council and unit fundraising.

NUMBER OF YOUTH IN UNIT: _____ NUMBER OF REGISTERED ADULTS: _____

CHARTERED ORGANIZATION ENDORSEMENT

Please provide as much information as possible to assist the committee in evaluating this application. Review the application to make sure that there are as many comments as appropriate and applicable.

Is there anything else the committee should consider?

Chartered Organization Rep:

Print Name Legibly _____

Sign _____ Phone: _____

Committee Member:

Print Name Legibly _____

Mailing Address: _____

Phone: _____ Email: _____

In keeping with the policies of the Boy Scouts of America,
the rules for acceptance and participation in the camp programs are the same for everyone
without regard to race, sex, creed, color, national origin, age, or physical limitation.

FOR COMMITTEE USE ONLY

DATE: _____ AMOUNT: _____ INITIALS: _____ CERTIFICATE NUMBER: _____