#### National Capital Area Council, Boy Scouts of America High Adventure Campership Information and Request Form Summer 2022 Season

## Please read the following information before applying:

- Each year, the National Capital Area Council (NCAC) High Adventure Committee (HAC), through the generosity of Philmont Scout Ranch's Waite Phillips Scholarship Fund, as well as other sources such as endowments and private donations, is able to offer limited financial assistance for Scouts registered in NCAC to participate in BSA High Adventure programs.
- Camperships are available to any youth member registered in NCAC who intends to participate on a trip for the specified year to Philmont Scout Ranch, either as part of a council trip or with his/her own unit.
- Additional notes about Campership funding:
  - Limited funding may be available for trips to other High Adventure bases.
  - Funding for Lenhok'sin High Adventure is awarded by NCAC's Camping Committee. Call 301-530-9360 for more information.
- The amount of camperships awarded varies each year depending on available funding and the number of requests received. While there may occasionally be some deserving cases warranting exceptions, maximum awards usually only cover a portion of the total cost of the trip. Scouts, families, units, and chartered organizations are expected to contribute if possible.
- Since campership funds are limited and the HAC's goal is to assist as many youth as possible, requests from adults will not be considered.
- While we recognize that many families desire to send a parent and a youth, or multiple youth, on a High Adventure trip, these are voluntary decisions. Priority for camperships will first be given to youth facing more critical and involuntary hardship situations (families with reduced income or other hardship situations).
- Camperships are awarded on the basis of the degree of need based on the information provided on this campership application. Please be honest when filling out this application. All information is maintained with the strictest confidentiality and is used only for making decisions regarding campership awards. All information is seen only by a select few senior members of the HAC who are responsible for awarding camperships. Recipient's names are never publicized.

All questions should be directed to Eric Smith at <u>eric.smith@scouting.org</u> or 301-214-9188.

Applications are due by **November 22, 2021**. Applications received after this date may not be accepted. All notifications regarding receipt of applications and amounts awarded will be made via email to the parent/guardian email address provided on the last page of this application. Failure to write legibly or provide complete information may result in applications not being considered.

Date

Parent/Guardian Signature

Date

Scan Completed Application and email to: highadventure@ncacbsa.org

# Applicant Information

| Date of Application:                     | _  |  |  |  |  |
|--|--|--|--|--|--|
| Full Name:                               | Date of Birth:   |  |  |  |  |
| Home Address:                            |  |  |  |  |  |
| City:                                    | State:ZIP Code:  |  |  |  |  |
| Home Phone:                              | Email:   |  |  |  |  |
| Unit #                                   | Venturing Crew     Other:                                  |  |  |  |  |
| Unit Leader's Name:                      |  |  |  |  |  |
| Init Leader's Phone:Unit Leader's Email: |  |  |  |  |  |
| Current Rank:                            | Are you registered for one of NCAC's High Adventure Trips? |  |  |  |  |
| # of Years in Scouting:                  | □ Yes □ No   |  |  |  |  |
| Leadership Positions Held:               | If YES, which base?  |  |  |  |  |
|  | □ Philmont □ Sea Base □ Northern Tier                      |  |  |  |  |
|  | Trip Date:   |  |  |  |  |
|  | If No, please provide the following information:           |  |  |  |  |
|  | Unit Type and # sponsoring trip:                           |  |  |  |  |
| Order of the Arrow Member:               | High Adventure Base attending:                             |  |  |  |  |
| □ Yes □ No                               | Arrival Date or Expedition #:                              |  |  |  |  |
| School Currently Attending:              | Grade:   |  |  |  |  |

Extracurricular Activities/Offices Held:

## Applicant Information (Continued)

Describe any previous High Adventure experience, or any backpacking, canoeing, or wilderness camping experience that you feel prepares you for a High Adventure experience. Please include details regarding your experience, including location and year.

Describe why you desire to attend a High Adventure program, how you have started preparing for your experience, what you hope to learn from your experience, and how you plan to use your High Adventure Experience within your unit and community after you return. Use additional sheets if necessary.

### Family and Financial Information

| Applicant lives with:  | □ Both Pare | nts   □ Sing | le Parent  □ ( | Other Relative or Guardian   |  |  |
|--|-------------|--------------|----------------|--|--|--|
| Number of Dependent Children in Household (including applicant):       |             |              |                |  |  |  |
| Does Applicant work?   | □ Yes       | □ No         | If YES:        | <ul> <li>Earnings are KEPT by Applicant</li> <li>CONTRIBUTED to Family Income</li> </ul> |  |  |
| Campership Amount Requested: Amount to be contributed by Applicant:    |             |              |                |  |  |  |
| Will Unit and/or Chartering Organization contribute towards trip cost? |             |              |                |  |  |  |
| □ YES Amount:<br>□ NO  |             |              |                |  |  |  |
| Name of Principal Wag  | e Earner:   |              | Total          | Family Income (all sources):   |  |  |
| Email address (REQUI   | RED):       |              |                | _Phone:  |  |  |
| Name of Employer:<br>contacted)  |             |              | (for in        | formational purposes only—will NOT be  |  |  |

Provide a statement of need in the space below. Use additional sheets if necessary. The HAC realizes that income is not necessarily the sole factor in determining need, so please specify any additional information (i.e., medical expenses, elder care, etc.) on why campership assistance is being requested. All information is kept confidential and will only be used for the basis of making decisions regarding campership award amounts.