## Scholarship Funds Application For Camp, Programs, or Events

Girl Scouts of Minnesota and Wisconsin Lakes and Pines (GSMWLP) strives to make programs financially accessible to all girls. Limited program assistance is available for council events, series, camp, and trips. A deposit minimum is required for every program.

These funds are made possible by United Way, community foundations, Girl Scout family contributions, the Girl Scout Cookie Program, and through the generosity of people who understand the importance of making programs available to every girl wanting to participate in Girl Scouts. Financial assistance is available to registered girls members of Girl Scouts Lakes and Pines, who, without this assistance, could not afford to attend a GSMWLP program. Girls should apply for assistance based on actual need.

To be considered for scholarship funds, please complete the following steps:

- Girls must be registered Girl Scouts. If not registered for the current membership year, please visit girlscoutslp.org to join. Scholarship funds are available for girl and adult membership through our online registration portal (MyGS) or by contacting the Girl Scout office.
- Fill out this form in its entirety and return it with your camp, trip, or event registration form.
- A separate scholarship application is required for each applicant and for each program.
- Submit the required deposit; girls do not receive financial assistance for deposits.
- Scholarship Fund Application must be submitted by the program registration deadline.

## **Part A: Request Information**

Name		Address		
Phone	City/State/Zip		County	
Camp, Series, Tr	ip or Event Name	Date/s		
Email for award	notification			
Do you receive f	ree or reduced meals via the National School L	unch Program?	🗆 Yes 🗆 No	
Has the girl part	icipated in: Fall Product Sale? $\Box$ Yes $\Box$ No	Girl Scout Cookie Progra	m?□Yes □No	
Projected Exp	<u>Dense</u>	Projected Contributi	on and Amount Request	ed
1. Camp, Series, Trip or Event Fee \$		2. Girl and/or Family Contribution		\$
		3. Cookie Dough Credits/Fall Bucks		\$
			if applies must complete form #4404)	\$
		5. Troop Contribution 6. Total	(add lines 2-5)	\$
		7. Amount Requested		\$ \$
Parent/Guardiar Please indicate f	n Name/s	situation:		
-	me (if applicable)			
•	information above is accurate and complete t			
Parent/Guardiar	n signature	Date _		
gsmwlp	<b>Send completed form to:</b> GSMWLP   400 2 Ave S   Waite Park, MN FAX 320 253 9403 Questions? 800-955-6032 or customercare		For office use only Approved	Amt DNotified