



# MID-AMERICA COUNCIL SCOUTING AMERICA

## Wood Badge Scholarship Fund Application

**SCHOLARSHIP PURPOSE:** To make participation possible for deserving Scouters who would otherwise be unable to attend Wood Badge. In administering funds given by generous people, fundraising, etc., great care must be exercised in order that only those Scouters who need and deserve such help shall be aided, and that details shall be handled in such a way as to avoid embarrassment to the scouter or his/her family.

Applications should be returned to the Mid-America Council, Durham Scout Center, Wood Badge Staff Advisor, 12401 West Maple Road, Omaha, NE 68164, no later than **July 1, 2025.**

Applicants may be eligible to receive up to one half of the total Wood Badge fee from the Scholarship Fund. All applications will be reviewed by the Wood Badge Scholarship Committee prior to the course and you will be notified of your award in writing.

You must register online at the MAC website and remit the \$50 deposit. This will hold your space in the course. Once applications are reviewed, you will be notified by the Scholarship Committee as to what your balance is and the date payable. The entire fee, less any scholarship awarded, is due 30 days before the course begins. If you are awarded no scholarship funds and you are not able to attend based on that, you may be eligible to receive a refund of your deposit amount.

Name \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State\_ZIP \_\_\_\_\_

E-mail \_\_\_\_\_

Unit Type \_\_\_\_\_ Unit # \_\_\_\_\_ District \_\_\_\_\_

Current Registered Position \_\_\_\_\_ Years involved in Scouting \_\_\_\_\_

Online Registration Number \_\_\_\_\_

Total fee for Wood Badge Course \$ \_\_\_\_\_

Amount to be supplied by Scouter \$ \_\_\_\_\_

Amount to be supplied by unit \$ \_\_\_\_\_

Amount to be supplied by charter partner \$ \_\_\_\_\_

Other sources \$ \_\_\_\_\_

Additional amount requested from the Scholarship Fund \$ \_\_\_\_\_

State specific reason for the need of this Scholarship, attach additional page if necessary.

\_\_\_\_\_

\_\_\_\_\_

Signature of Scouter: \_\_\_\_\_ Date \_\_\_\_\_

*For Office Use Only:* Amount of Award \$ \_\_\_\_\_ Date: \_\_\_\_\_ Authorized By: \_\_\_\_\_