

Longhorn Council National Youth Leadership Training Scholarship Request

This scholarship request must be submitted at least 60 days prior to the start of course.

Personal Information: *(Please print/type the following)*

Name: _____ District & Unit: _____

Home Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Parent Cell: _____ Youth Cell: _____

Parent E-mail: _____ Youth E-mail: _____

NYLT Course: _____ Rank: _____ Date of Birth: _____

Amount of scholarship request: \$ _____ **Maximum award is 50% of Program Fee**

Reasons for scholarship request

Describe in detail EACH unit fundraiser (e.g., popcorn, camp cards, etc.) and the Scout's participation during past year (attach supporting documentation when possible)

Provide a brief statement from the Scout in his/her own words why he/she wants to attend NYLT

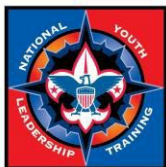
Prior Leadership Training and Experience (ILST/ILSC, Leadership positions held, etc.)

Scout Signature: _____

Date: _____

Parent/Guardian Signature: _____

Date: _____



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Signatures

Unit Committee Chair: I certify on behalf of the Troop Committee that the applicant cannot afford to attend NYLT without a scholarship and that Troop funds and projects have been considered and are not available to be provided to the applicant.

Committee Chair Name Committee Chair Signature Committee Chair E-mail

Chartered Organization Representative: I certify on behalf of the Chartering Organization that the applicant cannot afford to attend NYLT without a scholarship and that Troop funds and projects have been considered and are not available to be provided to the applicant.

COR Name COR Signature COR E-mail

50% OF PROGRAM FEE MUST BE PAID PRIOR TO OR WITH THIS REQUEST FOR APPROVAL

EMAIL THIS APPLICATION TO: longhorn.nylt@gmail.com

The NYLT Committee has reviewed this application and:

Approved a scholarship of \$_____

Denied (see below)

Returned for edits/additional information (see below)

Additional details:

NYLT Committee Chair: _____

Date: _____

NYLT Staff Advisor: _____

Date: _____