Program/Camp Assistance Form  
For Requests over $25  

THIS IS NOT A REGISTRATION FORM  
This form is for use in applying for scholarship assistance. Scholarships are available for ALL registered Girl Scouts and are based on need. All information related to scholarships is treated confidentially. Scholarships are supplementary and each family/person is expected to pay as much as they can toward the cost of the event. **Girl Scouts of Kentucky’s Wilderness Road Council will only cover less than 100% of the cost of an event, unless there is an extreme hardship.** Every effort will be made to provide enough support so that no one is denied participation in a Girl Scout event due to lack of funds. Scholarships may be used for Council-Sponsored Programs, resident camp, troop core camp and day camp. Rules for granting scholarships are the same for everyone regardless of race, color, creed, religion, national origin or disability.

SCHOLARSHIP PROCESS

**STEP 1:** Complete front and back of this form. **Incomplete forms will not be considered.**

**STEP 2:** Sign Program Assistance application.

**STEP 3:** Mail completed Program Assistance Form and Event Registration Form to:

| Resident Camp | Council Sponsored Day Camp | Council-Sponsored Program |

PARENT/GUARDIAN: PLEASE COMPLETE THE FOLLOWING INFORMATION

| Girls Name: | Telephone #: |
| Address: | City: | State: | Zip: |
| Event Name: | Email: |
| Scholarship Amt. Requested: $ | Family Contribution: $ | Cookie Dollars Used: $ |

**PLEASE CHECK ONE:**  
- □ Troop Member  
- □ Individual Member  
- □ Interest Group

Troop or Group#:  
Age:  
**Current Grade:**

Age Level:  
- □ Daisy  
- □ Brownie  
- □ Junior  
- □ Cadette/Senior

School District:  
School:

Girl lives with:  
- □ Both Parents  
- □ Mother Only  
- □ Father Only  
- □ Guardian

Email:

Mother’s Name:  
Daytime Phone:  

Father’s Name:  
Daytime Phone:  

Guardian’s Name:  
Daytime Phone:  


State any special reason why this girl needs this experience: ________________________________
______________________________________________________________________________

Did your girl participate in the Fall Product Sale?  □ YES  □ NO
If no, why not? ___________________________________________________________________

Did your girl sell Girl Scout Cookies?  □ YES  □ NO
If no, why not? ___________________________________________________________________

PARENTS(S)/GUARDIAN(S) COMPLETE THE FOLLOWING SECTION:
Mother's/Guardian's Name __________________________ Occupation __________________
□ Employed full or □ part-time?
Father's/Guardian's Name __________________________ Occupation __________________
□ Employed full or □ part-time?

Family's Combined Income: □ $15,000-$19,000  □ $20,000-$24,999  □ $25,000-$29,999  □ $30,000-$34,999
□ $35,000-$39,000  □ $40,000-$44,999  □ $45,000-$49,999  □ Over $50,000
List Amount ______________

How many people are supported by the above family income? _______________________

Ages of children living at home: ___________________________________________________
Number of girls attending this Girl Scout event: ______________________________________

Has a scholarship been requested before?  □ YES  □ NO
Was it granted?  □ YES  □ NO  Please state year(s)______________________________

State any reasons that will help with the decision regarding you request, such as medical expenses not covered
by insurance, expense to care for a person with a disability or any unusual financial expense.
_________________________________________________________________________________
_________________________________________________________________________________

THE FOLLOWING INFORMATION MUST BE COMPLETED BY YOUR GIRL SCOUT

I want to go to this event because ___________________________________________________
_________________________________________________________________________________

List some of you favorite Girl Scout activities that you participated in within the last year.
_________________________________________________________________________________
_________________________________________________________________________________

I CERTIFY THE ABOVE STATEMENTS TO BE TRUE TO THE BEST OF MY KNOWLEDGE.

I understand that Girl Scout-Wilderness Road Council will only cover less than 100% of the cost of
an event, unless there is an extreme hardship.

Parent/Guardians Signature________________________ Date________________________

***FOR OFFICE USE ONLY***

Date Received ______________ Amount Requested $____________ Amount Granted $____________

Approval Signature________________________