



# SCHOLARSHIP REQUEST

**Purpose:**

To further camp professionalism and create a best practice culture, the ACA Indiana Section provides scholarships to Indiana section members who need financial assistance to participate in professional development opportunities in the areas of camping and youth development.

**Guidelines:**

1. Must be ACA Indiana Section member
2. Must agree to "share the experience" with other section members through a workshop, presentation or article
3. Must show that the experience has direct influence/impact on camping professionalism
4. If applicant is unable to attend, they are responsible for payment of assistance

**Process:**

1. Complete the Scholarship Assistance Request form and submit to the section office.
2. Requests will be processed for approval by the ACA Indiana Scholarship Committee.
3. Once approved, candidate will be provided with a Certificate acknowledging the approval and details of payment.
4. Once experience is completed, candidate must share the experience and notify the ACA Indiana Scholarship Committee indicating when, where and how the experience was shared.

## SCHOLARSHIP ASSISTANCE REQUEST

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

Type/Description of experience: \_\_\_\_\_

Location of experience" \_\_\_\_\_

Date(s) and time(s) of experience: \_\_\_\_\_

Please answer the following questions on a separate page:

- Why should the section support your request?
- How will you benefit from the experience?
- How will you share your experience with the section?

I understand that upon approval, I must submit all required paperwork for processing and that if I am unable to attend (except in case of emergency) I shall reimburse the ACA Indiana Section for the cost of the scholarship. I also agree, upon approval, to share my experience with other members through a workshop, presentation or article.

Signature : \_\_\_\_\_

Date: \_\_\_\_\_

Approved by: \_\_\_\_\_

Approval date: \_\_\_\_\_

Registration	
Lodging	
Meals	
Other	
<b>TOTAL</b>	
Amount paid by agency	
Amount paid by applicant	
Amount of request	
Amount approved	