Order Of The Arrow Campership Application SHENSHAWPOTOO LODGE #276



Must be submitted by March 15th to be considered

Applicant's Name:	Unit #:
Address:	Phone:
Unit Leader's Name:	Phone:
Please indicate what camp camperships are for:	
Camp Rock Enon Summer Camp	Date:
Camp Rock Enon Cub Resident Camp	Date:
Does applicant receive school lunch or other educa	ational aid?
If so, please indicate:	
Please indicate degree of need below: (family and	living condition that merits Camperships.)

This form may only be used for Camp Rock Enon Boy Scout Summer Camp, Camp Rock Enon Cub Resident Camp in SAC.

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The ability for a Scout to receive a campership is based not only on the funds available through the Order of the Arrow, but also on the Scouts efforts in securing funding before making this request. **Requesting a campership is intended to be your last resort, not the first.**

Please list other areas where the Scout has	s attempted to	secure funding:	
Personal Funds	\$	_	
From Family	\$	-	
Popcorn or Camp Card	\$	-	
From Scout Unit	\$	-	
From Chartering Organization	\$	-	
Total from above	\$	_	
Please indicate amount you are requesting (Cannot be more than 50% of the total cost of the			
Camp Fee \$			
All Signatures below must be present to b	e included		
Approval of Parent/Guardian:			
	Print	Signed	Date
Approval of Unit Leader:			
Print		Signed	Date
Approval of Committee Chairman:			
	Print	Signed	Date
Report of Camperships Committee:			
Approved: Disapprove	d:	Date:	
If Approved, amount of campership allott	ed: \$	_	
Signed for Camperships Committee:			