



Environmental Traveling Companions (ETC)
Youth LEAD Scholarship Form

I. STUDENT & FAMILY INFO

Thank you for your interest in the ETC Youth LEAD Program! We strive to make outdoor experiences accessible to all, regardless of ability or economic status. We offer a range of scholarships and we will try our best to accommodate your request. We ask that families self-assess their circumstances and pay what they can. Please read the instructions carefully and send this application back to Yoseline Castillo at ylp@etctrips.org within 10 days of the applicant's interview, as spaces are limited.

Name of Student: _____
Age at course start: _____
Course name and start date: _____
Date of birth: _____
Student Address: _____

Parent/Guardian Name: _____
Parent/Guardian email address(s): _____
Parent/Guardian cell phone: _____
Best hours/days to call: _____

II. SCHOLARSHIP REQUEST *(To be completed by the parent or legal guardian)*

Due to the limited nature of our scholarship funds, we highly encourage applicants to contribute a portion of the cost. When applying for a scholarship, please indicate the amount that you are able to contribute.

TOTAL COST OF THE COURSE..... \$ _____
REQUESTED SCHOLARSHIP AMOUNT..... \$ _____
PERSONAL CONTRIBUTION..... \$ _____

IV. **FINANCIAL OUTLINE** (To be filled out by the parent or legal guardian)

TOTAL FAMILY TAXABLE INCOME \$ _____
TOTAL PUBLIC ASSISTANCE RECEIVED \$ _____
TOTAL CHILD SUPPORT RECEIVED..... \$ _____
TOTAL NON-TAXABLE INCOME..... \$ _____

V. **EXPENSES** (To be filled out by the parent or legal guardian)

Please list your major **monthly** expenses below. Please indicate if any sections are not applicable.

HOUSING OR RENT..... \$ _____
TRANSPORTATION & CAR INSURANCE..... \$ _____
FOOD AND GROCERY..... \$ _____
CHILDCARE AND SCHOOL COSTS..... \$ _____
UTILITY BILLS..... \$ _____
LOANS..... \$ _____
ANY ADDITIONAL EXPENSES..... \$ _____

Please specify if needed: _____

MONTHLY TOTAL EXPENSES: \$ _____

I, _____ (Parent/Guardian Name) undersigned attest that the above financial information is accurate and to the best of my knowledge.

X _____
SIGNATURE OF PARENT/GUARDIAN DATE

Our mission is to make outdoor adventures accessible for all, and **we do our best to meet each applicant's needs!** All scholarship applications are assessed on a case by case basis. We take into consideration the student's financial need and how much demand we have for scholarships overall. We also work with other organizations whenever possible to co-fund a student's spot, to alleviate as much of the financial burden from families as possible.

Example Scholarship Scenarios:

Sam applied for the 14-Day Access to Adventure Course. The full course cost is \$3,850. Sam's guardians filled out the scholarship form, requesting a \$2,000 scholarship from ETC. ETC reviewed the scholarship form and approved the request. Sam's family's contribution to the course is \$1,850.

James is a participant at Pomeroy Recreation and Rehabilitation Center. He heard about ETC's Youth LEAD Program through Pomeroy's newsletter, and is really excited to apply for the 14-Day Access to Adventure Course. His family filled out the scholarship application, requesting a \$3,400 scholarship from ETC. Pomeroy Center agreed to contribute an additional \$400 to James's participation in the course. With ETC and Pomeroy's support, James's family's contribution is \$50.

Please submit this completed form to:

**Yoseline Castillo, ETC Youth LEAD Program
Manager Email: ylp@etctrips.org**

If needed, a hard copy can be mailed to:

Environmental Traveling Companions
2 Marina Blvd Fort Mason Center, Building C, Suite C385
San Francisco, CA 94123