



**Columbia-Montour Council, Boy Scouts of America**  
**Application for Scholarship Assistance**



In Honor of Dr. Mark Pyles

*All sections/signatures must be complete or the application will be REJECTED*

**Youth Name:** \_\_\_\_\_ **Phone:** \_\_\_\_\_  
**Address:** \_\_\_\_\_ **City:** \_\_\_\_\_ **Zip:** \_\_\_\_\_  
**Unit Type & Number:** \_\_\_\_\_ **Chartering Organization:** \_\_\_\_\_

Does your Unit offer opportunities for the Scout to participate in money-earning projects such as the Popcorn Sale, Camp Cards and Peanut Sale? Yes / No

If yes, which projects has the Scout participated in this year? If No, why not? \_\_\_\_\_

\_\_\_\_\_

Parent/Guardian statement explaining detailed need for assistance: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Camp or Scout event the scholarship will be used toward: \_\_\_\_\_

Please state your academic achievements (preference given to strong academic performances of a 3.0 GPA or higher):

\_\_\_\_\_

\_\_\_\_\_

Please list any civic or church work you do within your community, paid and volunteer: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Family's annual income \$ \_\_\_\_\_ Number of children in household: \_\_\_\_\_

**Parent/Guardian Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Unit Recommendation: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Scoutmaster Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

or

**Chartered Organization Rep. or Committee Chair Signature:** \_\_\_\_\_

All information on this form will be kept confidential and use only by the scholarship committee