

Application for Financial Assistance – STEM Scouts

Requests may or may not be granted, based on available funds and eligibility. STEM Scout Labs are encouraged to provide financial assistance through annual fundraising efforts. Council funds are intended to help families in need when STEM Lab funds are not available.

Application should be completed by parent or guardian. All information will be kept confidential.

Name: _____ Youth Adult Date: _____

Age: _____ STEM Lab Location (Chartering Organization): _____
(Youth Only)

Name of Parent/Guardian: _____
(Youth Only)

Address: _____ City: _____ Zip: _____

Phone Number: (H) _____ (M) _____

Briefly describe the family’s need for assistance: _____

Annual Household Income: \$ _____ Total Household Members: _____

Type of assistance requested:

- \$200 STEM Scouts Annual Registration Fee (up to 50% of the fee could be awarded)
 - Uniform (T-shirt & Lab Coat)
- Indicate shirt size: Small Medium Large Extra large

Each family applying is asked to contribute what they are able towards the total cost of the items requested above. Amount family will contribute: \$ _____ (enclosed with application)

Parent or guardian’s signature: _____

Lab Manager’s signature: _____

Questions: Please contact us at 715-355-1450

<i>Office Use Only</i>
Date Received: _____
Amt. Approved: \$ _____
By: _____

