

**Girl Scouts Louisiana East**

**Corporate Headquarters**  
841 S. Clearview Parkway, New Orleans, LA 70121-3119  
(504) 733-8220 (800) 644-7571 F (504) 733-8219

[www.gsle.org](http://www.gsle.org)

**Regional Service Center**  
545 Colonial Drive, Baton Rouge, LA 70806  
(225) 927-8946 (800) 852-8421 F (225) 927-8402

**Girl Scout Camp Scholarship Request**

*Any active registered Girl Scout in Girl Scouts Louisiana East may apply for a camp scholarship to attend one camp session.*

Complete the camp registration form and camp scholarship request and send both to the Girl Scout Office by April 15 to be eligible for first round of allocations. After this date, funds may be limited.

**TO BE COMPLETED BY PARENT OR GUARDIAN:**

\_\_\_\_\_

Camper's Name \_\_\_\_\_ Parent/Guardian \_\_\_\_\_

\_\_\_\_\_

Address \_\_\_\_\_ City, State \_\_\_\_\_ Zip \_\_\_\_\_

(\_\_\_\_\_) \_\_\_\_\_ (\_\_\_\_\_) \_\_\_\_\_ (\_\_\_\_\_) \_\_\_\_\_

Home \_\_\_\_\_ Work \_\_\_\_\_ Cell \_\_\_\_\_ Grade in Fall \_\_\_\_\_

**Ethnic (choose one)**  American Indian/Alaska Native  African American  Hawaiian, Pacific Islander  White  Other  
Are you also of Spanish/Hispanic origin?  Yes  No

**Is she a:**  Registered Girl Scout: Troop # \_\_\_\_\_ Service Unit # \_\_\_\_\_  Individual Member

**Program Age Level in Fall:**  Brownie  Junior  Cadette  Senior

No. of Years as a Girl Scout \_\_\_\_ Did she participate in the most recent Girl Scout Fall Product and Cookie Sales?  Yes  No

How often does she participate in Girl Scout activities, meetings, etc.? \_\_\_\_\_

\_\_\_\_\_ (\_\_\_\_\_) \_\_\_\_\_ (\_\_\_\_\_) \_\_\_\_\_

Leader's Name \_\_\_\_\_ Home \_\_\_\_\_ Work / Cell \_\_\_\_\_

**Family Income:**  Under \$15,000  \$15,000 - \$25,000  \$25,000 - \$35,000  
 \$35,000 - \$45,000  \$45,000 - \$55,000  OVER \$65,000

Number of people supported by this income \_\_\_\_\_ Number of dependent children living at home \_\_\_\_\_

List any unusual or extraordinary family expenses or circumstances \_\_\_\_\_

\_\_\_\_\_

Program your camper would like to attend \_\_\_\_\_ Dates \_\_\_\_\_

Although not required, partial or full reimbursement (when and if possible) of any funds granted is appreciated and accepted at any time. This enables your Council to continue to provide assistance for girls and adults when the need arises.

Amount you can pay \$ \_\_\_\_\_

Has she received financial assistance from the Girl Scouts before?  No  Yes —When, amount received and for what purpose? \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Parent/Guardian  Troop Leader  Other

<b>OFFICE USE ONLY:</b> Amount Granted: \$ _____	Total Due from applicant \$ _____	Appv'd by _____	Date _____
Program Cost: \$ _____	% authorized _____		
Received by _____	No. _____	date _____	DATA ENTRY: by _____ date _____