CORNHUSKER COUNCIL CAMP STAFF SCHOLARSHIP APPLICATION

Please be sure to use only this form when applying

Application Deadline – November 1st, 2026

To ensure that your application is reviewed and processed as quickly and accurately as possible, read and follow these procedures and requirements as written. All scholarship checks will be mailed directly to academic institutions. Scholarship awards **may be up to** **$500 per application** year. There is a 4 application / award limit. These awards are not cumulative but based solely on the requirements below, being met in the year of application

All applicants must meet the following requirements:

1. Have been on camp staff the season prior to application.
2. Completed camp employment contract as agreed upon.
3. To be in good standing as camp staff member and performed in a satisfactory manner.
4. Earn a minimum of 2.75 GPA

PROCEDURE

The staff member applying for a scholarship must:

- Complete the application personally.
- Enclose only the items requested.
- Submit all supplemental information with the application form to ensure that all items are available for review at the same time.
- Address complete application to Cornhusker Council, Attn. Michelle Austin, 800 South 120th Street, P.O. Box 269, Walton, NE 68461.
- Be advised that applications become the property of the Cornhusker Council.
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APPLICANT'S INFROMATION Please type or print in black ink.

Name _____ Age _____Date of Birth _____
(First / Middle / Last)

Home Address _____ City _____ State _____ Zip _____

Home Phone (___)_____Cell Phone (___)_____

Father/Guardian _____ Daytime Phone Number (___)_____

Mother/Guardian _____ Daytime Phone Number (___)_____

Email Address _____

Employment position held last summer at Camp Cornhusker _____

SCHOOL INFORMATION
Name of high school, or school of continuing education last attended

_____

Address _____ City _____ State _____ Zip _____

Principal's or Dean's Name_____Telephone (___)_____

High School Graduation
Date_____

Your SAT Score_____and / or ACT Score_____

Percentile Ranking_____ Your GPA_____ (Converted to 4.0 scale)

Career Aspirations: Please attach supporting documentation-1 page maximum.

Reason for Applying for Scholarship: Please attach supporting documentation- 1 page maximum.

If I am selected, please send the scholarship directly to the following institution.
_____

Degree Program _____

Mailing Address for Student Accounts _____

City _____ State _____Zip_____

Phone number for Student Accounts Office: (___)_____

Student Account/ID#_____

I hereby authorize the Cornhusker Council to request and obtain any additional information it may deem necessary. **On my honor as a Scout, all information and statements on this form are true and correct.**

Signature of Applicant_____ Date_____

I have read the foregoing application, and it has my approval.

Signature of Parent/Guardian _____ Date _____

Any questions contact Michelle Austin at 402-488-6501 or email michelle.austin@scouting.org