Environmental Traveling Companions

Scholarship Application

Agency Partner

**General Information**

Agency Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Zip \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Fax \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Trip agency is applying for: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |
| --- | --- |
| Have you done trips with ETC in the past? | Yes No |

If yes, how many years has the agency been doing trips with ETC? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If yes, what programs has your group/agency participated in with ETC? *Please circle all that apply*

|  |  |  |  |
| --- | --- | --- | --- |
| Cross Country Skiing | Sea Kayaking | Whitewater Rafting | Youth LEAD |

**Agency Mission**

Please use the space below to describe the mission of your organization and the nature of the special needs of the participants (i.e. people with disabilities or disadvantaged youth) that your organization serves:

|  |  |
| --- | --- |
| What percent of the participants who would attend this trip receive some form of government assistance? (i.e. free and reduced lunch, well fare, etc.) | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Does your organization currently provide outdoor recreation opportunities aside from trips with ETC? | Yes No |

If yes, please explain the nature of the agency’s outdoor recreation programming

**Financial Information**

Organization annual operational budget: $\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |
| --- | --- |
| Does your organization currently hold non-profit status? | Yes No |

What are the agency’s primary funding sources? *Please circle all that apply.*

|  |  |  |  |
| --- | --- | --- | --- |
| Fee for Service/Tuition | Private Donors | Grant Funding | Government Funding |

Other (please explain): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Who will be paying for this trip? *Please circle.*

|  |  |  |
| --- | --- | --- |
| Individual Participant Contribution | Agency Funds | Combination of Agency and Participants |

Other (please explain): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**Scholarship Request**

Amounts of ETC scholarship awarded vary based need, though we ask agencies contribute some amount toward the cost of the trip. Please indicate the amount of scholarship your agency is requesting per person:

 Amount of Scholarship Requested (per person) $\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please describe your agency’s reason for requesting scholarship assistance and why an ETC trip would benefit your participants (use additional page if necessary)

Please submit this form via email, fax, or post:

I \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (print name) attest that the above information is accurate to the best of my knowledge.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature Date

 Environmental Traveling Companions Email: info@etctrips.org

 ATTN: Scholarships Phone: 415-474-7662 ext. 10

 2 Marina Blvd. #C385 Fax: 415-474-3919

 San Francisco, CA. 94123