Paul Walters - Outpost Scholarship Application

V4 - effective 11/24/23

Eligibility requirements:

- 1. Any group eligible for charter/EveryBoy Initiative (EBI) within a district of the United States. EBI is preferred and more info can be found here: https://royalrangers.com/everyboy
- 2. Start-up Ranger groups who are not actively using program, have NEVER chartered, or have NOT chartered in the past 2+ years.
- 3. Complete this application with all required information and signatures.
- 4. Submit a brief (1-page maximum) document or email explaining the financial need and the "story" behind why you want to start or re-start Royal Rangers at your church.
- 5. Activities discount will be handled by the participating Sections/District.
- 6. Charter/EBI participation is required and must be part of the initial reimbursement request. Other items are eligible for reimbursement, but chartering/EBI is required as that is a primary goal of the Scholarship. Keep and submit receipts for reimbursement. Receipts may be scanned and emailed.
- 7. Please limit reimbursable requests to two (2) submissions max, but one is ideal. Reimbursement applies to both new outpost and sponsoring outpost. Submit several pictures of the new outpost in action (at a meeting or event) with your reimbursement request.
- 8. Email application and reimbursement request to Dwight Walters, <u>dwalters@udel.edu</u>, 410-920-9239.

This form must be signed by your Pastor and District Director prior to submission to the Foundation for consideration of the \$1,000 Outpost Scholarship and \$250 Sponsoring (Existing) Outpost Scholarship. Application and attachments must be complete.

Church Information (New Outpost)

Name of Church:	District:
Address:	Section:
City, State, Zip:	
Phone number:	
Checks payable to:	
Pas	tor Information (New Outpost)
Pastor's name:	Pastor's email:
Phone number:	Pastor's email:
Pastor's signature:	
Outpo	st (New) Coordinator Information
=	Position:
Phone number:	
E-mail address:	
Outpost (Spon	soring/Existing) Coordinator Information
Name of contact:	Outpost #:
Position:	
Phone number:	
E-mail address:	
Church Name and City/State:	
District Director's Name:	District:
Email address:	District: Phone No.:
District Director Signature:	Date:
You will be notified via email if your schol	arship application is approved.
Dwight Walters - Signature of School	larship approval Date