



Friends of Youth and Nature

Outdoor Education Scholarship Form

Friends of Youth and Nature (FOYAN) is focused on expanding youth opportunities to learn about and spend time in the outdoors, regardless of resources or circumstances. We work with many area partners on including diversity, equity and inclusion in all activities we support. The FOYAN scholarship program is designed to assist individual students, schools or youth groups, and local providers in Delta, Mesa, Ouray and Montrose counties to facilitate these vital nature experiences.

Application process:

- Applications will be considered on a first come, first served basis, year-round, for as long funding is available.
- Applications must be submitted at least two weeks prior to the event.
- Applications must be signed by a parent/guardian, school or youth group administrator, or provider representative.
- Applications must be complete to be considered.
- Applications must be submitted by email to anita@friendsofyouthandnature.com
- All information submitted throughout the application process will remain confidential

Scholarship review and award process:

Applications will be reviewed by FOYAN board members upon receipt to determine eligibility and award. Please note that FOYAN funding is limited. One scholarship per entrant per calendar year will be accepted unless there are documented extenuating circumstances. FOYAN reserves the right to award less than the full amount requested. Applicants will be notified by email of award status

Follow-up:

- Award recipients are required to provide a follow-up report on how scholarship funds were used, including a detailed narrative and 1-3 quality photos. Student thank you notes are appreciated!
- Scholarship recipients are expected to assist with at least one FOYAN fundraising event per calendar year.

Indemnification

By accepting a scholarship from Friends of Youth and Nature, the awardee understands that FOYAN donates this money in good faith and agrees to hold harmless FOYAN, the FOYAN Board of Directors, and all FOYAN volunteers from any and all liability. The awardee accepts full responsibility and liability for the outdoor experience to which this award is applied.



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Scholarship Application Information

Program name to be funded: _____

Amount Requested: \$ _____ **Number of youth served:** _____

Type of Funding Requested: Student Scholarship Busing Provider Project

Has the applicant previously applied for a FOYAN funding request? Yes No

Has the applicant previously received FOYAN funding? Yes No

Full Name of Applicant: _____ **Grade Level** (if applicable): _____

Parent or Guardian Name (if student applicant): _____

Student's School and/or Provider's Name: _____

Student Ethnicity:

White Native American Hispanic Black Asian Other

Address to Send Payment If Awarded:

Street Address or PO Box: _____ City: _____ State: _____ Zip Code: _____

Email: _____ Phone: _____

Attestation:

By signing below, I certify that all information provided is true and correct to the best of my knowledge.

Signature: _____ Printed Name: _____ Date: _____



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Scholarship Application Information

In 300 words or less, please indicate why it is important for FOYAN to fund this request, and how the request aligns with FOYAN's vision, mission, and goals.

Student Applications: You may attach proof of financial need such as Free/Reduced Lunch letter, copy of Medicaid/CHP+ card, or include an explanation of extenuating family circumstances.

School/Youth Group/Providers: Please include how you intend to positively impact youth, and how many youth will be impacted.