



2020 FRIENDS – Social and Travel Program Scholarship Application

Guardians/Caregiver(s) of an adult with intellectual or developmental disabilities are invited to apply for (up to) a \$500 trip scholarship from FRIENDS Social and Travel Program. The scholarship program has limited funding available, so submit your application as soon as possible.

WHO MAY BE ELIGIBLE?

Applicants are eligible for a trip scholarship once every calendar year, and one travel scholarship per household per trip.

PARENTS/ CAREGIVERS ARE RESPONSIBLE FOR THE FOLLOWING:

1. Finding the right trip for the individual:

(A list of available trips can be found on www.friendsofbroomfield.org) The trip must be able to accommodate the individual's needs. For example, some trips are wheelchair accessible, while others are not.

2. COMPLETE AND LEAVE TRAVEL SCHOLARSHIP APPLICATION

Mail the application and the completed questionnaire form to:

FRIENDS Social and Travel Program
11851 Saulsbury St.
Broomfield, CO 80020

SCHOLARSHIP AWARD NOTIFICATION

Scholarships from FRIENDS Social and Travel Program are not guaranteed until individuals, parents/caregiver(s) receive an approval letter from FRIENDS Social and Travel Program confirming the travel scholarship. The scholarship from FRIENDS Social and Travel Program will be deducted from the total cost of the trip. If there is a remaining balance, the parent/caregiver(s) is responsible for paying that amount directly to FRIENDS Social and Travel Program per the current payment policy. FRIENDS Social and Travel Program will not reimburse parent/caregiver(s) for a payment already made to a trip, including any deposit.



2020 Travel Scholarship Application

Application form and information

(applicants are eligible for travel scholarship once every calendar year)

Date: _____ Scholarship amount request (up to \$500.00) \$ _____

Name: _____ DOB: _____

Parent/ Caregiver name: _____ Phone# (____) _____

Street address: _____ City, State, Zip: _____

County: _____

Name of trip you would like to travel on: _____

REQUIRED INFORMATION:

- The individual or guardian(s) are responsible for completing current consent form provided by FRIENDS Social and Travel Program at www.friendsofbroomfield.org
- Application must be filled out completely

APPLICATION CHECKLIST

- Complete the 2020 Trip Scholarship Application
- Participant questionnaire
- Include with this application a completed current registration form found on www.friendsofbroomfield.org

MAIL THIS APPLICATION TO

FRIENDS – Social and Travel Program

11851 Saulsbury St.

Broomfield, CO 80020



Participant Questionnaire

1. **Do you receive public assistance income?**

YES NO

If yes, how much do you receive monthly? _____

2. **Do you have a job?**

YES NO

If yes, what is the amount you earn per month? _____

3. **Are there any other people that support you financially, with related or not?**

YES NO

If yes, what amount of assistance do they give you? _____

4. **Are you financially responsible for anyone else?**

YES NO

5. **What type of residence do you currently live in?**

- Supported living facility
- Independent living
- Host Home
- With family
- Other: _____

6. **Write the name of the trip you are interested in?** _____

Why are you requesting a scholarship?

Is traveling one of your annual goals?

How would this scholarship positivity affect you?



Criteria for acceptance of scholarship

1. Has this individual traveled with Hills in the past with no scholarship assistance?

YES NO

If yes:

Date of the trip: _____

Trip name: _____

Total cost of the trip: _____

A. Why is this individual requesting a scholarship now?

2. Has this individual ever received a scholarship in the past from Hills?

YES NO

If yes:

Date of the trip: _____

Trip name: _____

Scholarship amount: _____

3. Has this individual ever requested a scholarship and been denied by Hills?

YES NO

If yes, what were the circumstances involving the denial?

4. How much is the individual requesting? \$ _____

5. How many days is the individual's trip? _____

6. Is the trip within the US or International? _____

7. Would the individual be able to travel without the scholarship?

YES NO

8. Is the individual able to pay off the remaining balance of the trip within the mandated timeframe set by Friends - Hills Travel & Social Program?

YES NO



If no, how long would the individual need to complete the full payment?

9. What are the benefits and drawbacks of awarding this individual a scholarship?

Benefits: _____

Drawbacks: _____

10. Is there space available on the trip? _____