



## Information for Scholarship Applicants

Dear Scholarship Applicant and Parent/Guardian(s),

Thank you for your interest in the Colorado Outward Bound School Scholarship Program. Thanks to generous donations from foundations, corporations, parents, instructors, and alumni, COBS awards over \$100,000 in scholarships each year.

At the time of enrollment, you indicated that you were interested in applying for financial assistance through the COBS Student Opportunity Fund, our partial-tuition scholarship program. Student Opportunity Fund Scholarships are based on financial need, student motivation, and the potential to excel on a wilderness course. Please review the information below to get started:

- **Scholarship Application** – In filling out the scholarship application, please keep in mind that we need all of the requested information to assess your financial situation and offer an appropriate award. **Incomplete scholarship applications will not be reviewed and applicants will not receive a scholarship**, so be sure to check for accuracy before submitting. A summary of the application requirements is below: If you are applying for multiple scholarships (i.e. siblings) an individual scholarship application must be completed for each applicant. **Please return all materials to [admissions@cobs.org](mailto:admissions@cobs.org).**
- **Personal Video** – Please send us a short video telling us about yourself. Why do you want to take a course? What are you hoping to learn? What makes you a great candidate for a scholarship? How will the course benefit you in your every day life?
- **Financial Overview** – Please provide detailed financial information regarding the applicant's (student going on course) household by completing the Financial Overview section. If the applicant is under 21 years old or not self-supporting, financial information from both parents is also required. In the case of divorced parents, we request that you submit complete information for both the primary and the secondary residences.
- **Federal Tax Returns** - We also require that you include a copy of the applicant's (and/or parent/guardian(s)) most recent Federal Tax Return(s) (1040 Tax Form and associated Schedules and Forms).
- **Explanation of Financial Need** – We want to fully understand your financial situation. Please complete this section according to the directions and include as much detail as possible. Please also include why you want to attend a COBS course.
- **Returning your Application** – Please RETURN your Scholarship Application with the rest of your application materials. We cannot review your scholarship application until your entire application is received.

Our Scholarship Program is guided by a single principle: Every person should be given the opportunity to experience adventure and challenge, develop character and compassion, and learn social and environmental responsibility, regardless of financial ability. However, we expect you to approach this experience with a high level of motivation, give it your all and complete your course successfully. I look forward to helping you achieve your goal of a fulfilling Outward Bound experience. Please feel free to contact me if you need assistance in filling out the application or if you have additional questions.

Thank you,

Student Services  
Colorado Outward Bound School  
phone: 720-381-6589  
fax: 866-404-1517  
[admissions@cobs.org](mailto:admissions@cobs.org)



## Scholarship Application

**RETURN**

Please complete each of the fields below.

### **I UNDERSTAND AND AGREE WITH THE FOLLOWING STATEMENTS:**

- The information provided by me is true and complete to the best of my knowledge. I understand that withholding or misrepresenting my financial situation could affect my participation.
- I am submitting my (and/or my parent/guardian(s)) most recent Federal Tax Return(s) (1040 Tax Form and associated Schedules and Forms) with this application. If I am not, I have explained why in the Explanation of Financial Need section of this application.

### **Section 1. Explanation of Financial Need**

Please use this space to indicate why you are applying for a scholarship to attend a COBS course. Attach an additional sheet if necessary. Explain any extenuating circumstances you would like COBS to consider in reviewing your application. Include anything that would not be immediately apparent from your Financial Overview in Section 3 of this application or other financial documentation. Examples include: information regarding custody and child support for divorced families, medical bills, Social Security Income, foster children, school loans, etc. **The more information we have, the better we are able to assess the need for a scholarship.**

### **Section 2. Estimate of Financial Need**

\_\_\_\_\_ **Course Number**

\$ \_\_\_\_\_ Course Tuition

Minus \$ \_\_\_\_\_ Amount I Can Provide

Minus \$ \_\_\_\_\_ Amount of Aid from Other Sources (family members, other organizations, etc.)

Equals \$ \_\_\_\_\_ Net Amount Needed as Scholarship (Scholarship awards typically do not exceed 30% of the course tuition. Please consider this threshold in your award request.)



Section 3. Financial Overview

RETURN

Please complete the fields below. If the applicant is under 21 or not self-supporting, income information for both parents is required. In the case of divorced parents, please include information for both the primary and the secondary residences.

Table with 5 columns: Applicant, Spouse, Parent(s)/Guardian(s) (at primary residence), Parent(s)/Guardian(s) (at secondary residence, if applicable). Rows include ANNUAL INCOME (Salary Before Taxes, Other Income, Support, Total Income), ANNUAL EXPENSES (Living Expenses, Other Annual Bills, Total Expenses), and NET INCOME.

Table with 5 columns: Applicant, Spouse, Parent(s)/Guardian(s) (at primary residence), Parent(s)/Guardian(s) (at secondary residence, if applicable). Rows include ASSETS (Cash on Hand, Real Estate, Investments, Retirement Plan, Auto, Total Assets), DEBTS (Mortgages, Bank Loans, School Loans, Auto, Other Debts, Total Debts), and NET WORTH.

DO YOU PARTICIPATE IN A FREE OR REDUCED LUNCH PROGRAM? IF YES, PLEASE SUBMIT A LETTER OF VERIFICATION FROM YOUR SCHOOL. [ ] YES [ ] NO

DETERMINATION OF DEPENDENCY (of applicant):

- A. Has or will the applicant live with their parent(s) for at least 6 weeks... in the past 12 months? [ ] Yes [ ] No in the next 12 months? [ ] Yes [ ] No
B. Did or will the applicant's parent(s) claim them on... last year's tax return? [ ] Yes [ ] No this year's tax return? [ ] Yes [ ] No
C. Did or will the applicant's parent(s) give them more than \$1,000 support... last year? [ ] Yes [ ] No this year? [ ] Yes [ ] No

ALL CHILDREN IN YOUR FAMILY

Table with 5 columns: Name, Age, School, Total School Annual Cost, Family Contribution. Rows 1-5.

ADDITIONAL DEPENDENTS

Table with 3 columns: Name, Age, Circumstance (ex. grandmother living with family). Rows 1-2.