



## **Student Opportunity Fund Applicants**

Dear 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 is able to award several scholarships a 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. These awards are based on financial need, student motivation, and the potential to excel on a wilderness course. Please review the information below to get started:

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**, 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.

- Personal Video** – Please send us a short video telling us about yourself. Why do you want to attend? What are you hoping to learn? What makes you a great candidate for a scholarship? How will the course benefit you in your everyday life?
- Explanation of Financial Need** – We want to fully understand your financial situation. Please complete this section by including as much detail as possible. Please also include why you want to attend a COBS course.
- Estimate of Financial Need** – Please detail the total amount of scholarship you are requesting.
- Financial Overview** – Please provide detailed financial information regarding the student's household 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).

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,

Nohemi

Nohemi Mora

Scholarship Program Coordinator

Colorado Outward Bound School

phone: 303-676-8238

fax: 866-404-1517

[nmora@cobs.org](mailto:nmora@cobs.org)



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. 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**

	<b>Course Number</b>				
		\$ _____	Course Tuition		
Minus		\$ _____	Amount I Can Provide		
Minus		\$ _____	Amount of Aid from Other Sources (family members, other organizations, etc.)		
Equals		\$ _____	Net Amount Needed (Scholarship awards typically do not exceed 30% of the course tuition. Please consider this threshold in your award request.)		



**Section 3. Financial Overview**

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.

	<b>Applicant</b> (Student going on course)	<b>Spouse</b> (required if Applicant is married)	<b>Parent(s)/Guardian(s)</b> (at primary residence)	<b>Parent(s)/Guardian(s)</b> (at secondary residence, if applicable)
<b>ANNUAL INCOME</b>				
Salary Before Taxes				
Other Income (dividends, interest, business/farm income or loss, social security, unemployment)				
Support				
<b>Total Income</b>				
<b>ANNUAL EXPENSES</b>				
Living Expenses (rent, food, utilities, clothing, etc). – Living expenses are things you consider “necessities.”				
Other Annual Bills (cable, phone, entertainment, tuition, etc)				
<b>Total Expenses</b>				
<b>NET INCOME</b> (Income minus Expenses)				

<b>ASSETS</b>				
Cash on Hand and in Accounts				
Real Estate Value				
Investments Value				
Retirement Plan Value (ex. IRA or 403B)				
Auto (yr./model/value)				
Auto (yr./model/value)				
<b>Total Assets</b>				
<b>DEBTS</b>				
Mortgages (remaining balance)				
Bank Loans and Credit Cards (balance)				
School Loans				
Auto (yr./model/amt. owed)				
Auto (yr./model/amt. owed)				
Other Debts				
<b>Total Debts</b>				
<b>NET WORTH</b> (Total Assets minus Debts)				

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**

Name	Age	School	Total School Annual Cost	Family Contribution
1.				
2.				
3.				
4.				
5.				

**ADDITIONAL DEPENDENTS**

Name	Age	Circumstance (ex. grandmother living with family)
1.		
2.		