



Burn Survivors of New England

Hope, Courage, Community, Acceptance

World Burn Congress

Scholarship Application

The completed form and a refundable deposit of \$50 **MUST** be received by BSONE **NO LATER THAN June 20, 2017 without exception.**

**Payment instructions below*

Please complete all applicable fields. Thank you!

Applicant Name:

First Name Last Name

Please Check Your Affiliation:

- Burn Survivor
- Family Member
- Other (explain below)

Other Affiliation:

Date of Birth:

Age:

Primary Language:

Do You Require a Translator?

Address:

Street Address

Street Address Line 2

City

State / Province

Postal / Zip Code

Home Phone:

Area
Code

Phone Number

Cell Phone:

Area
Code

Phone Number

E-mail:

Additional Accompanying Applicants :

(List names, ages, relationship(s) to Primary Applicant):

Emergency Contact Name :

Relationship to Applicant:

Emergency Contact Phone:

Area Phone Number
Code

Have you attended a Phoenix Society World Burn Congress?

Yes

No

If yes, what year(s):

Did you receive financial assistance from BSONE to attend?

Yes

No

Annual Household Income (inclusive of all members):

Please list any outstanding circumstances contributing to financial need for scholarship:

Have you applied for financial assistance from other sources to attend this year's WBC?

Yes

No

If yes, from whom?

How much are you able to comfortably contribute towards the cost of your trip to World Burn Congress?

What mode of transport do you plan to use to get to WBC in Texas?

Have you participated in Peer Support visits to burn survivors this year?

Please check BSONE events you have participated in during the past year:

Annual Walkathon

Annual Dinner Dance

Support Meetings

Other (please note in box below):

Other BSONE events you have participated in during the past year:

Please describe any other volunteer involvement you had with the burn community this year:

Please use this space to note any additional comments, concerns or questions you have regarding the application process.

PAYMENT OF REFUNDABLE DEPOSIT:

Scholarship applications will be considered only after the deposit has been received.

***NOTE:** If payment will be submitted under another name (e.g. someone else will be making the payment for you), please note the applicant's name along with the payment to ensure more expedient processing of your application. Thank you!*

Please submit the refundable application deposit in the amount of \$50.00 via the PayPal field below, **OR** you may pay via check by mailing a check in the amount of \$50.00, made out to "BSONE" to:

BSONE
c/o David Vogel
15 Beech Street
Cambridge, MA 02140

Please choose your method of payment:

I will be paying by check.

I will be paying via PayPal (see below)

To pay via PayPal:

1. Please type "50.00" (without quotes) into the PayPal box below.
 2. After you have completed and signed the application, please click the "Submit" button (found at the very bottom of the application), and you will be automatically taken to a PayPal logon screen to complete the transaction.
-

E-Signature

I certify that I have read, understand and agree to the BSONE's Scholarship Recipient Guidelines and Expectations and that the information I provided on this application is accurate.

***By signing (typing your legal name) in the space below, you are certifying that you are the person completing this application. When you press the submit button, you will receive an email confirmation that your application was received. Please keep this email for your records and retain it as verification of your application.**

Applicant E-Signature:

NOTE:

If you do not receive an email confirming your submission within 24hrs, need assistance, or are experiencing technical issues when trying to apply, please contact: admin@bsone.org and we will respond as promptly as possible. Please include your full name and the best way to contact you. Thank you!