

RUSTY ALLEN FUND APPLICATION

CHILDREN'S INTERNATIONAL SUMMER VILLAGES, INC.
USA



The attached application is for the Rusty Allen Fund. Please answer all the questions on the attached form and send it to the National Office (address found at the bottom of the application).

Below you will find the original text that created the Rusty Allen Fund.

This CISV Erastus S. Allen Memorial Fund has been set up as a special and separate part of the CISV Endowment Fund. The interest from this Memorial, in as direct a way as possible, is to be used to facilitate participation of children and youth in the CISV programs: Villages, Reunions, Seminars, Special Meetings, and so on. At times, interest from this fund might be applied toward expenses of graduates of the St. Edmund's '51, St. Columbe '52, Lillsved '53, Olive Branch '55, and Frostavallen '56 Villages, who might thereby be enabled to engage further in some special CISV events, thus aiding the continuity of contributions by CISV by those early delegates to whom "Uncle Rusty" became an especially close personal friend.



APPLICATION FOR NATIONAL SCHOLARSHIP FUNDS

1. Name of Chapter/Steering Committee _____
2. Name of delegate to whom Chapter scholarship has been awarded _____
3. Address of delegate _____
4. Program which delegate will attend _____
(Please include reference number, country and Chapter where program will be held, and year or years in which program will take place.)
5. Amount of scholarship awarded to this delegate by your Chapter _____
6. Is some or all of this amount in the form of a loan to the delegate or the delegate's family? _____

If so, what amount is to be repaid to the Chapter? _____

How long is the repayment period? _____

Is interest charged? _____

7. If funds are awarded by the National Scholarship Fund, will they be

- a. _____ Added to the amount of the Chapter scholarship?
- b. _____ Added to your Chapter's existing Scholarship Fund?
- c. _____ Added to your Chapter's general treasury?
- d. _____ Other (please explain) _____

By signing this application, I certify that the above information is correct to the best of my knowledge.

Date _____

Signature

Print Name

Office or Position Held

Please send this application by **MAY 1** (for Summer programs) or **NOVEMBER 1** (for Winter programs) to **CISV USA, 1375 Kemper Meadow Drive, Suite 9H, Cincinnati, OH 45240**. Please note that it is possible that all available scholarship money may be distributed following the MAY 1 application deadline in any given year, so early application is advisable, even for children chosen for Winter programs.

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