



## THE ROBERT C. KLOS, SR. SCHOLARSHIP APPLICATION

Criteria: Campground Owners of New York offers scholarships to members in good standing that have owned and operated their park for at least one year and been a member of CONY for one year. As a part of our mission statement, continuing education is key in the success of growth, improvement and development of independently owned campgrounds in New York State.

As a member of CONY you are eligible to receive scholarship funds to be used toward the following:

- A. **National School of RV Park and Campground Management**, operated by ARVC. Up to \$300 per award. 3 scholarships available, annually. Deadline to apply is the last day of the annual CONY Exposition & Trade Show.
- B. **Attend the ARVC Annual Conference**. Up to \$300 per award. 1 scholarship available annually. Deadline to apply is October 30th.
- C. **Attend the CONY Exposition**. Up to \$200 per award. 1 scholarship available, annually. Deadline for application is October 30th.
- D. **"At Large" Scholarships for Continuing Education Courses** that are applicable to the Outdoor Hospitality Industry (such as conferences for NCA, PaCOA, secondary education, seminars, etc). Up to \$150 per award. 1 scholarship available annually. Deadline for application is October 30th.

**Requirement for Reimbursement of Expenses:** Upon completion of the event, submit proof of attendance along with a copy of the signed and approved application to the CONY office, Attention: Scholarship Program.

### Application:

Name: \_\_\_\_\_

Position/Title: \_\_\_\_\_

Campground Name: \_\_\_\_\_

Campground Address: \_\_\_\_\_

City: \_\_\_\_\_ State: NY Zip Code: \_\_\_\_\_

Email Address: \_\_\_\_\_

How long have you held your current position? \_\_\_\_\_

How many years have you been in the campground industry? \_\_\_\_\_

Are you a member in good standing? (All fees paid for current year)? \_\_\_\_\_

What is the amount you are requesting? \$\_\_\_\_\_

What are you requesting the Scholarship for? \_\_\_\_\_

Dates of the event: \_\_\_\_\_

Organization/School/Sponsor of event: \_\_\_\_\_

**Email two-page application to [info@campnewyork.com](mailto:info@campnewyork.com), or mail to ATTN: Scholarship Program, CONY, 1 Grove St., Suite 200, Pittsford, NY 14534.**

**For more information about the Robert C. Klos, Sr. Scholarship Program, contact Rosemary Celelli, CONY 3rd Vice Chairperson, at [Rcelelli@gmail.com](mailto:Rcelelli@gmail.com)**



Please answer the following questions (use a separate sheet if needed):

1. What do you expect to gain from the event for which you are requesting the scholarship?
  
  
  
  
  
  
  
  
  
  
2. How will the funds be used? (Travel, tuition, lodging, etc)
  
  
  
  
  
  
  
  
  
  
3. Please summarize your experience and submit with your request for reimbursement

Signature \_\_\_\_\_ Date: \_\_\_\_\_

Scholarship applications must be submitted 30 days prior to the event for which you are requesting funds. Your signature attests that all statements made are truthful and expenses submitted are for the event you requested them for, any unauthorized use of scholarship funds is not permitted.

Office Use ONLY		
Application Received By: _____	Date: _____	Check Sent Date: _____
Approved Payment By: _____	Date: _____	By: _____