



## **Nancy J. Preston Educational Fund Guidelines**

**PURPOSE:** This fund was developed to offer financial assistance to individuals seeking to attend educational opportunities in order to better serve today's youth in the camping field.

**ELIGIBILITY:** Applicants must be an ACA, Upstate New York member in good standing. Eligible opportunities include ACA Upstate New York events, ACA National conferences, events, trainings, or other related opportunities.

**DEADLINE FOR APPLICATIONS:** Four weeks prior to the beginning of the event.

**ADMINISTRATION OF FUND:** The Nancy J. Preston Educational Opportunity Fund is administered by Adam Bell (professional development co-chair), John Quinlivan (vice-chair /treasurer), and Shawn Tiede (chair).

**LIMITS OF THE FUND:** The fund can be used for either registration or travel and hotel expenses and will be so limited to those areas of expense. It will pay up to 100% of either registration or travel and hotel expenses for any recipient. An individual may apply for and receive assistance only once per year.

**SUBMIT** application to:  
The Preston Educational Fund Committee  
ACA, Upstate New York  
[jalbarran@ACAacamps.org](mailto:jalbarran@ACAacamps.org)

800-428-2267  
[www.ACAacamps.org/upstatenewyork](http://www.ACAacamps.org/upstatenewyork)

## Application for the Nancy J. Preston Fund

Date:

Name:

Mailing Address:

Email:

Telephone - Home/Cell:  
Work:

Position/Business:

ACA Member Number:

Name of event for which I am requesting funds:

Location of event:

Date(s) of event:

I am applying for \_\_\_\_\_ Registration fees \_\_\_\_\_ Travel/Hotel costs

Amount I can contribute:

Balance of funding needed:

Please answer the following questions on a separate sheet:

1. How will these funds further your educational and career goals?
2. What committee, programs, etc., have you or would you be interested in serving on to help support ACA Upstate New York?
3. What else are you doing to further your education and career?
4. What is your financial need, and what other sources of funding do you have?

Have you received financial assistance from this fund before? \_\_\_ Yes \_\_\_ No

If yes, when?

For what:

Please choose one of the three options below:

\_\_\_\_\_ I agree to write an event summary or an educational article on an event topic for a Section News Brief.

OR

\_\_\_\_\_ I agree to conduct a workshop at an ACA Upstate New York event on an event topic.

OR

\_\_\_\_\_ I agree to speak at an ACA Upstate New York event about the Preston Fund in order to help promote its use.

Signature:

Date: