



# Special Olympics Minnesota Law Enforcement Torch Run (LETR) Application

<b>JAN. 1:</b> Sports, activities & events in Winter Games sports season
<b>FEB. 15:</b> Sports, activities & events in Spring Games sports season
<b>MAY 1:</b> Sports, activities & events in Summer Games sports season
<b>JULY 1:</b> Sports, activities & events in Fall Games sports season
<b>OCT. 1:</b> Sports, activities & events in Bowling and Flag Football season

The purpose of the LETR Scholarship Fund is to support athletes or delegations who would otherwise not have the opportunity to attend a state/regional event, purchase necessary sports equipment, or start a new sport or delegation.

***The LSMT Coordinator or Head of Delegation applies for funds*** by completing both pages of the application.

Application and proposed request budget is ***mailed or faxed (612-333-8782) to Special Olympics Minnesota, Attn: LETR Scholarship Fund.*** Deadlines for submission are outlined above.

Program staff reviews and researches the application within three weeks of the sport deadlines, unless otherwise specified. Applicant may be asked to provide more information as well.

***Program staff approves, denies or modifies the request and notifies applicant of decision within three weeks of deadline.***

## **APPROVAL**

Call or email is made to applicant announcing approval or approval with adjustments. Congratulatory letter is sent to applicant and a transfer is made into the delegation's centralized account.

Scholarship fund report (sent with congratulatory letter) must be submitted within three weeks of competition or event.

## **DENIAL**

Letter is sent to the applicant explaining the justification for denying the request and, if applicable.

Denial of request may be due to, but is not limited to, the following:

Request does not fall within priority funding areas.

Applicant has not undertaken adequate fundraising activities or planned any activities.

Applicant has not fulfilled financial reporting duties.

Application was not submitted by submission deadlines.

Delegation the applicant is representing has sufficient funds in centralized account to cover request.

Request is deemed an inappropriate use of funds.

Delegation has received large scholarship award(s) in the past.

## SECTION 1: ANNUAL BUDGET INFORMATION

NOTE FOR REQUESTS: If you are not the Head of Delegation (HOD) or LSMT Coordinator, please let that individual know that you are submitting this scholarship request.

Delegation Name	
Name of Person Submitting Request	
Preferred Daytime Phone Number (is needed for follow-up questions)	
Email Address	

<b>ANNUAL BUDGET (ALL REVENUE AND EXPENSES THROUGHOUT THE CALENDAR YEAR)</b>			
<b>Revenue</b>	<b>Received/Spent To Date</b>	<b>Still to Spend/ Expect This Year</b>	<b>Total</b>
Gifts from Individuals	\$	\$	\$
Gifts from Foundations	\$	\$	\$
Gifts from Businesses	\$	\$	\$
Gifts from Civic & Service Organizations	\$	\$	\$
Revenue from Fundraising Events (ex. Pancake Breakfast)	\$	\$	\$
Revenue from Sales & Promotions (ex. Wreath Sale, Candy Bar Sales)	\$	\$	\$
Scholarship Awards (if awarded previously this year)	\$	\$	\$
Shared Revenue - State offered fundraisers (ex. Polar Plunge, Raffle Sales)	\$	\$	\$
Stipends (ex. new team)	\$	\$	\$
Athlete Participation Fees	\$	\$	\$
Miscellaneous	\$	\$	\$
<b>Expenses</b>			
Apparel and Uniforms	\$	\$	\$
Banners/Signage	\$	\$	\$
Facilities	\$	\$	\$
Lodging	\$	\$	\$
Marketing /Public Relations	\$	\$	\$
Meals and Provisions	\$	\$	\$
Supplies/Equipment	\$	\$	\$
Travel (Transportation)	\$	\$	\$
Games Fees	\$	\$	\$
Training Fees (coaches)	\$	\$	\$
Fundraising Expenses	\$	\$	\$
Office Supplies	\$	\$	\$
Postage and Freight	\$	\$	\$
Printing Expenses	\$	\$	\$
Other	\$	\$	\$

\* The "total" column amounts should equal the amounts listed in the first two columns.

**SECTION 2: SCHOLARSHIP REQUEST INFORMATION**

How many athletes will benefit from this request?		What sport are you requesting money for?	
Cost per athlete (requested amount /# of athletes)	\$	What is the team contribution toward event/sport expenses?	\$
If this scholarship is for an event, how far is it from your location to the event location?		_____ Miles Round Trip	
If you have a participation fee for athletes, what is it used for, and how much is it?		\$	
Annually, how many sports does your team offer?			
Have you received scholarship money already this year or in previous years? When? _____ How much? _____		\$	
What is the current balance of your delegation's centralized account?		\$	

**Event/Sports Budget Detail**

Please complete a total budget for the event/sport season for which you are requesting scholarship money. Attach additional sheets if necessary.

**SUPPLIES/EQUIPMENT**

Item(s) purchased	Quantity purchased	Cost per item	Total equipment cost
		\$	\$
		\$	\$

**FACILITY**

Facility name	Number of rentals	Cost per week/session	Total facility rental cost
		\$	\$

**GAMES FEES**

Event	Number of athletes	Number of coaches	Total games fee cost
State	x \$20 = \$	x \$15 = \$	\$

**LODGING**

Dorm/hotel	Number of rooms	Cost per room	Total lodging cost
		\$	\$

**MEALS**

Meal (Breakfast/lunch/dinner)	Number of coaches/athletes	Cost per meal	Total meal cost
		\$	\$
		\$	\$

**TRANSPORTATION/TRAVEL**

To what event?	Number & type of vehicles	Cost per vehicle	Total transportation cost
		\$	\$
		\$	\$

**APPAREL/UNIFORMS**

Items (shirts/shorts/jacket, etc.)	Number purchased	Cost per item	Total uniform cost
		\$	\$
		\$	\$

**OTHER**

List expense:	\$
Total Event/Sports Budget	\$
Subtract Team Contribution Amount	- \$
Total Scholarship Request	\$