

## Bethany's Butterflies Scholarship Guidelines

### **Mission:**

Bethany's Butterflies Scholarship was established in 2016 in loving memory of Bethany Mazur. The scholarship is intended to provide children with special needs with a positive and fun life experience (camp, therapeutic horseback riding lessons, etc.) that they otherwise may not be able to enjoy.

Bethany Mazur Bethany Lynn Mazur, age 28, of Balsam Lake, WI, formerly of Hudson, WI, died suddenly on July 18, 2015 as the result of an automobile accident in Apple River Township, WI.

Bethany was born on September 20, 1986 in Knoxville, IA to Michael and Kim (Owen) Mazur. She attended Ranchview Elementary School in Naperville, IL and Williamsville East High School in Buffalo New York. Bethany received a Bachelor of Arts degree in Agriculture Engineering Technology from the University of Wisconsin - River Falls while commuting from her home in Balsam Lake, WI

While in college she worked part time for a home healthcare agency and made a life impact on a young autistic boy. She taught him it was ok to play in shaving cream and more importantly she showed him how to turn a bad day into a good day. She enjoyed working for many years at the Thirsty Otter Tavern & Resort in Balsam Lake, and until she died she worked in Quality Control at Tenere in Dresser, WI.

Bethany was a talented athlete and competitive cheerleader. She mastered the one-handed push up and was working on the handstand push up. Her love for the sport of competitive cheerleading created many lasting friendships around the world. As a sophomore at Williamsville East HS she received the most valuable player award. She loved to cook, was very creative, and a big-time reader. Bethany loved spending time with Joel Paquette, the love of her life. In the summer, they especially enjoyed spending time in the outdoors - camping, canoeing, and kayaking near the Namekagon River.

Many knew Bethany from her trusting and outgoing nature and her creative spirit. She was a genuine people person, lighting up any room she walked in to. She was a caring person and protective of her ideals, willing to stand up for what she felt was important to her and those that she loved.

Bethany's family created this scholarship to honor Bethany's ability to relate positively to children with special needs.

### **Eligibility:**

- Applicants must have an Individualized Education Plan (IEP)
- Applicants must be 21 years old or younger

### **Selection Criteria:**

Scholarship recipients are selected based on the expected benefit of the experience. Awards are granted without regard to race, religion, gender, sexual orientation, disability or national origin.

### **Scholarship Awards:**

In 2017, Bethany's Butterflies Scholarship will award a total of \$350. Notification of committee decisions will be given to all applicants. All committee decisions are final.

Scholarship funds are made payable directly to the organization providing the experience in accordance with IRS Regulations.

### **Timing:**

Scholarship applications will be available in March, due in April, announced in May, and paid as necessary.

Please contact Angie Pilgrim at St. Croix Valley Foundation ([apilgrim@scvfoundation.org](mailto:apilgrim@scvfoundation.org)) with any questions regarding the scholarship program.

# Bethany's Butterflies Scholarship Application

Bethany's Butterflies Scholarship was established in 2016 in loving memory of Bethany Mazur. The scholarship is intended to provide children with special needs with a positive and fun life experience (camp, therapeutic horseback riding lessons, etc.) that they otherwise may not be able to enjoy.

The deadline for application is **March 30, 2018**. Applicants will be notified in May 2018.

Please type or write legibly. Incomplete applications will not be accepted.

## Submit this application to:

Scholarship Services  
The St. Croix Valley Foundation  
516 Second Street, Suite 214  
Hudson, WI 54016  
Or via email: [apilgrim@scvfoundation.org](mailto:apilgrim@scvfoundation.org)

Telephone: 715-386-9490  
Fax: 715-386-1250

## I. Applicant (Parent or Teacher):

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

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

City, State, Zip: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Email address: \_\_\_\_\_

Child's Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

## II. Explain the experience you would like to provide for your child / student:

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

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

City, State, Zip: \_\_\_\_\_

Anticipated Date of Experience: \_\_\_\_\_

Overview of Organization: \_\_\_\_\_

---

---

---

---

Overview of Experience: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**III.** Please explain why and how your child/student would benefit from this experience.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**IV.** Please explain why you need this scholarship.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Applicant Signature

Date