

# Scholarship Application

## Child's Information

Child's Name: \_\_\_\_\_

Child's Age: \_\_\_\_\_

Child's School: \_\_\_\_\_

## Parent/Guardian Information

Parent's Name: \_\_\_\_\_

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

Parent's Cell: \_\_\_\_\_

Parent's Email: \_\_\_\_\_

## Emergency Contact

Person: \_\_\_\_\_

Relation: \_\_\_\_\_

Cell: \_\_\_\_\_

Does the child have a reliable ride to camp/class?

YES

NO

What camp/class would the child like to participate in?  
(#1 Being their first choice and so on.)

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

## Teacher Recommendation

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

Teacher Email: \_\_\_\_\_

Teacher Phone: \_\_\_\_\_

Comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Scholarship Awarded:

YES

NO