

2019 Freeville Summer Recreation Program Scholarship Application

INSTRUCTIONS: A parent or guardian **MUST** complete and sign this application in order to be considered for a scholarship. **Proof of qualification must be included. The deadline for submission is June 1 – no applications will be accepted after this date!**

QUALIFICATION: In order to qualify for a scholarship, your household must qualify for at least one of the following:

- HEAP
- TANF
- Free/Reduced School Lunch Program
- DSS Child Care Assistance
- Family Health Plus/Child Health Plus
- Food Stamps/WIC

PARENT/GUARDIAN INFORMATION:

Name/Address _____

Home Phone _____

Cell Phone _____

Work Phone _____

CAMPER(S):

Name _____

Name _____

Name _____

Name _____

SIGNATURE: I am applying for assistance with my summer program fees. I understand that all information provided is strictly confidential and will only be used in determining eligibility for a scholarship. I also understand that funds are limited and that if I am awarded assistance, I will be responsible for the balance due prior to the start of camp.

Signature _____

Date _____

Staff Use Only

Date Received: _____

Qualification: _____ HEAP _____ Free/Reduced School Lunch Program
_____ TANF _____ DSS Child Care Assistance
_____ Family Health Plus/Child Health Plus
_____ Food Stamps/WIC

Scholarship Approved: YES NO Staff Initials: _____

Total Reg. Due \$ _____ Scholarship Amt \$ _____ Balance Due \$ _____