

Date: _____

CampCare Scholarship Request Form:

A request for a full or partial Camp scholarship must be received by Carol Moore, Director of CampCare, no later than March 30th. All requested information on this form must be included for the camper scholarship to be considered. You will be notified no later than the end of April of the Scholarship Committee's decision.

This scholarship request will be treated as confidential and reviewed only by those CampCare Board Members who serve on the Scholarship Committee. Carol Moore will provide the Committee with your scholarship request.

There are very limited funds available for scholarships, so please only request a scholarship if a financial hardship exists. Only request that amount of money toward the cost of camp that is actually required to send the camper to camp. Prior receipt of scholarship money does not guarantee money for upcoming camp.

Camper's Name: _____

Parents/guardian's Name: _____

Address: _____

Number of years attending CampCare: _____

Has camper received scholarship money in past three years? If so what year and amount:

Who do we contact in regards to this request: _____

Phone: _____

Camper's Income:

Does camper receive SSI or SSDI ___ yes ___ no Amount received monthly? _____

Does camper have a paying job? ___ yes ___ no Amount earned monthly? _____

Parent's /Guardian's ability to contribute toward camp:

Please explain difficulties in funding camp?

What amount of Scholarship is camper requesting: \$ _____

Send form to Director CampCare. P. O. Box 12155, Reno, NEVADA 89510-2155