



Request for Oconee County 4-H Camp Scholarship

All information given will be evaluated by 4-H staff only. All information will be kept private and confidential.

DIRECTIONS:

- ✓ Complete this application form (please type or print clearly); incomplete applications will not be considered.
- ✓ Complete the summer camp registration form.
- ✓ Return the application and attached letters by **March 13, 2020** to Kelle Ashley at the Extension Office. After this date, scholarships applications will not be accepted.
- ✓ **A \$75 deposit will be due at the time of submitting your scholarship application to secure a camp spot for your child.** If your child is not selected to receive a scholarship and you no longer want to send your child to camp, your deposit will be refunded.
- ✓ **NOTE: Returning this application DOES NOT guarantee a spot for camp.**

CRITERIA AND DETAILS:

- ✓ Scholarships are available for Cloverleaf (4th-6th grade), Junior (7th-8th grade), and Senior (9th-12th grade) camps.
- ✓ Scholarships are based on need and participation level in Oconee County 4-H.
- ✓ Number and amount of scholarships available are based on amount of donations/funding we receive.
- ✓ **After scholarships are awarded, the remainder of camp payment must be paid by May 12, 2020. Recipients are responsible for paying remainder of the cost of camp not covered by the scholarship.**
- ✓ Notification of scholarship decisions will be made as soon as possible **after March 20.**
- ✓ Contact Kelle Ashley at ksashley@uga.edu with questions regarding camp scholarships.

Today's Date: _____

Child's Name: _____ Gender: _____

Parent/Guardian's Name: _____

Address: _____

City: _____ Zip: _____

School: _____

Grade: _____ Age: _____ Teacher: _____

Phone: _____ Email: _____

Has your child previously attended a residential camp? Yes No

Signature: _____

Please answer the questions on the next page to complete your application.

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1. **Level of Need:** Partial scholarship Full scholarship

2. Financial Need Statement:

Estimated annual household income: _____ Number in household: _____

Does the 4-H member receive any of the following?

____ Aid to Families with Dependent Children (AFDC)

____ Food Stamps

____ Free or Reduced School Lunch

Please detail your financial need for a camp scholarship and how your child will benefit from participating in camp.

3. Previous 4-H Experience:

Please detail any 4-H programs or activities your child has participated in previously.

4. Please attach 200 words or less written by the 4-Her on "Why I want to attend 4-H camp."

Thank you for your application!