



# 2009 Confidential Scholarship Application

## Instructions

1. Complete a 2009 Summer Camp Registration form and **include a \$50 deposit**. We will refund your deposit if a scholarship is not awarded.
2. Complete this Scholarship Application. Include a copy of your most recent Federal Income Tax Form 1040 (just the two pages) as income verification.  
**We cannot process your application until we receive this form.**
3. Mail the Summer Camp Registration, the Scholarship Application, and your deposit to 1872 Pilot Knob Rd, Kattskill Bay, NY 12844.  
**A \$25 processing fee is charged for cancellations after February 1.**

Camper's name \_\_\_\_\_ Male  Female

Home address \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Have you already registered for 2009? \_\_\_\_\_ Session requested? \_\_\_\_\_ 2nd choice \_\_\_\_\_ 3rd choice \_\_\_\_\_

Race/ethnicity: **Circle:** White Black/AfAm Asian/Pacific Isles Hispanic Other \_\_\_\_\_

Family status: **Circle:** Single parent One income Two incomes Foster Guardian Other \_\_\_\_\_

Mother's name \_\_\_\_\_ Father's name \_\_\_\_\_

Place of employment \_\_\_\_\_ Place of employment \_\_\_\_\_

Family Dependents (Children and others living at home):

Name	Age	Name	Age
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Reason for request (explain home and family situation and child's individual needs):

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Referred by (agency or individual): \_\_\_\_\_

**The following information must be provided in order for us to process your application:**

Approximate total annual family income in 2008? \$ \_\_\_\_\_. Our family is able to pay \$ \_\_\_\_\_ of the \$1,545 tuition for the two-week session or \$900 for the one-week session for which I have applied.

If Chingachgook is unable to provide scholarship assistance, would you still plan to attend camp? \_\_\_\_\_

To the best of my knowledge the above statements are true.

Parent/Guardian Signature \_\_\_\_\_

Date \_\_\_\_\_

<i>For office use</i>			
Deposit received	\$ _____	Session approved	_____
YMCA scholarship	\$ _____	Date processed	_____
Family will pay	\$ _____	Referral agency will pay	\$ _____