

REQUEST FOR 4-H SNOW CAMP SCHOLARSHIP DIRECTIONS:

Complete this application form...one form and essay per personplease print clearly.

Attach a paragraph detailing how the youth or adult would benefit from attending camp, what you can contribute to snow camp, and how the cost of Snow Camp could cause a financial burden on your family. All applications will be considered.

*Return the application and attached letter by January 15th, 2017 to the Scholarship Committee:
jkatawicz@ucanr.edu

Criteria:

Scholarships are based on need and activity level in the 4-H Club and County. Amount of scholarship awarded will be based on number of applications received, level of need and scholarship funding available. Scholarships will be awarded by Jan 15th, if there is a remaining balance due, payment must be received by Feb 1st, 2017.

*******Notification of scholarship will be made to you as funds become available*******

Child's Name: _____

Gender: _____ Age _____ (or adult) _____

How many days will you attend Snow Camp, and how many others in the family will attend?

Parent/Guardian's Name:

Address:

_____ City: _____ Zip: _____ Daytime Phone: _____

_____ Alt Phone: _____

How many children are in your family? _____ Ages: _____

Please list all 4-H activities your child has participated in:

What activities do you plan to do at Snow Camp? Are you able to lead a game or craft?

*Information about financial need is kept in strictest confidence by the camp committee

Parent Signature:
