



Scholarships for C-A-M-P

Eligibility for Assistance

Students must: 1) demonstrate financial need based on the application 2) Not all eligible applicants will receive an award as funds are limited.

Criteria for Awards

Scholarships are based on: 1) financial need, 2) potential for growth and development through the C-A-M-P experience, 3) background and experience which will broaden the cultural diversity of C-A-M-P 4) space availability.

How to Apply

Applicants must submit a completed Scholarship & Tuition Assistance application. For the best opportunity for assistance, return your application as early as possible! Applications for the session will be reviewed on a rolling basis starting in January; applications received early are more likely to be awarded.

Please return to Eileen Rogosin, C-A-M-P P.O. Box #484 Tesuque, New Mexico 87584

C-A-M-P Scholarship & Tuition Assistance Application

Page 1 (To Be Completed by Parent/Guardian)

Camper First Name _____

Last Name _____

Address _____ City _____ State _____

Zip _____

County _____ Home Phone _____

Camper E-Mail _____

New Camper

Returning

School _____

Present Grade _____ Birthdate _____ Age _____

Female Male

First year Camper referred by (Website, Camp Referral Service, Camp Fair, Current Camper Name, etc.) _____

Parent/Guardians (Please list each parent or guardian who is fiscally responsible for camper.)

Dr Mr Ms Mrs First Name _____
Last Name _____

Relationship Mother Father Other _____ SSN _____

Job Title _____ Employer _____ Years w/
Employer _____

Dr Mr Ms Mrs First Name _____
Last Name _____

Relationship Mother Father Other _____
SSN _____

Job Title _____ Employer _____ Years w/
Employer _____

Parent(s) E-mail _____

Financial Information

Parent/Guardian(s) who claim camper as a tax dependant _____

	2010 Actual	2011 Estimated
Parent/Guardian		
Wages, Salaries, Tips	_____	_____
Interest, Dividends, Refunds, Credits, etc.	_____	_____
Business Income (Loss), Capital Gain (Loss)	_____	_____
Alimony, Social Security, Unemployment, etc.	_____	_____

Any Other Income	_____	_____

Parent/Guardian II

Wages, Salaries, Tips	_____	_____
Interest, Dividends, Refunds, Credits, etc.	_____	_____
Business Income (Loss), Capital Gain (Loss)	_____	_____
Alimony, Child Support, Social Security, etc.	_____	_____
Any Other Income	_____	_____
Total	_____	_____

Monthly Rent/Mortgage _____

Current Total Debt _____
Monthly Car Payment _____
Monthly Bills (Misc.) _____ Cost of Camp _____
Total _____

Please list all dependents, starting with the applicant

Name	Age	Grade	School	Yearly Tuition
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

The tuition for the session is \$1795. Scholarships are very limited. Please indicate the amount of tuition assistance your camper would require in order to attend C-A-M-P.

Why do you feel your child needs a scholarship? Please use the space below for explanations or circumstances you would like the committee to consider when reviewing your child's application.

I have read and completed this form to the best of my ability and certify that all information included is accurate. I understand that this application will not be reviewed without all pages completed by a parent/guardian, camper, as well as the most recently filed tax return.

Signature of Parent/Guardian _____ Date _____

C-A-M-P Scholarship & Tuition Assistance Application

(To Be Completed by Camper)

What do you like to do in your spare time?

Please describe some of your favorite experiences in the arts (school projects, private lessons or classes, performances, etc.) _____

What would you choose as seminars at camp? _____

What do you hope to learn in your classes?

How do you feel about living in a bunk with 8-10 other people? _____

What do you think will be the most exciting part of C-A-M-P?

Please use the space below to describe why you want to attend C-A-M-P; please attach extra pages if necessary.