



REQUEST FOR 4-H CAMP SCHOLARSHIP

DIRECTIONS:

- ✓ Complete this application form (please print clearly)
- ✓ **Attach a paragraph** detailing financial need for a camp scholarship and how your child will benefit from camp
- ✓ Return the application and attached letter by **March 21, 2024** to: Madison County Extension/4-H Office
- ✓ You **MUST** come to the 4-H office as soon as possible to register your child for camp (if not already registered). A **\$100.00** non-refundable deposit will be due at this time to secure a camp spot for your child. Please contact 706-795-2281 if you have any concerns.

CRITERIA:

- ✓ Scholarships are based on need and activity level in the 4-H Club.
- ✓ Scholarship amounts are determined by which scholarship is awarded. After scholarships are awarded, the remainder of camp payment must be paid by May 3, 2024.

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

Today's Date: \_\_\_\_\_

Child's Name: \_\_\_\_\_ Parent/Guardian's Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip: \_\_\_\_\_

Grade: \_\_\_\_\_ Age: \_\_\_\_\_ School: \_\_\_\_\_ Teacher: \_\_\_\_\_

Daytime Phone: \_\_\_\_\_ Alt Phone: \_\_\_\_\_

How many children are in your family? \_\_\_\_\_ Ages: \_\_\_\_\_

Has your child ever been to a residential camp before? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, what camp(s)? \_\_\_\_\_

\*Household Yearly Income: \_\_\_\_\_ \*Sources of income \_\_\_\_\_

\*Information relative to financial status is kept in strictest confidence by the scholarship committee

Signature \_\_\_\_\_