

Camp SEA Lab

2018 Starr Family Scholarship Application

APPLICATION CRITERIA

- 1) Scholarship awards are based on the following criteria. Priority is given to:
 * first-time applicants * income that falls within the free/reduced lunch framework * date of submission
- 2) Only one camp session per summer per child can apply.
- 3) Multiple siblings per summer or session can apply.
- 4) No payments are due with application, but a minimum of 25% of camp tuition payment is required if approved.

APPLICATION PROCEDURES

- STEP 1:** Complete entire application, including amount of financial assistance requested. One application per child.
- STEP 2:** Collect income verification: a copy of your **2017** Federal Tax Return (Form 1040 page 1&2 OR 1040EZ), with child's name listed as a dependent. Please black out all social security numbers.
- STEP 3:** Submit application with income documentation to the Camp SEA Lab office before **5:00 PM on APRIL 1st**.
Mail application and documents to: Camp SEA Lab, 100 Campus Center, Building 42, Seaside, CA 93955
- STEP 4:** Your application status will be sent to you within 2 weeks of completed application and income verification.
 All balance payments are due **MAY 1st**.

PARENT/GUARDIAN INFORMATION

First Name: _____ Last Name: _____

Home Address: _____ City: _____ State: _____ Zip: _____

Primary Phone: _____ Second Phone: _____ Email: _____

Child lives with (check one): both parents mother only father only legal guardian

Number of children living at home: _____ Names and ages: _____

Total household annual income: _____ Number of dependents on household income: _____

Do you qualify for free or reduced school lunch program? No Yes (submit documentation)

CHILD INFORMATION

First Name: _____ Last Name: _____

Gender: _____ Birthdate (mm/dd/yy): _____ Swim ability: 1 non-swim to 5 excellent

Current School Name: _____ Grade (spring 2018): _____

FINANCIAL ASSISTANCE REQUEST

Has this child received financial aid from Camp SEA Lab in the past? No Yes, then what year?

First choice camp name: _____ Session #: _____ Dates: _____

Second choice camp name: _____ Session #: _____ Dates: _____

Third choice camp name: _____ Session #: _____ Dates: _____

Camp Tuition Amount: _____ Amount you can pay (at least 25% required): _____

Scholarship amount you are requesting from Camp SEA Lab in assistance (no more than 75%): _____

You are welcome to indicate any special circumstances that relate to this request on additional pages (optional).

How did you hear about Camp SEA Lab?

Parent/Guardian Signature: _____ Date: _____

OFFICIAL USE ONLY

Appl. Rc'vd:	Documents Rc'vd:	Amt Awarded:	Reg. Coupon:
Date Reserv'd:	Notified:	Acceptance Date:	Reg. Complete: