

## Scholarship Application Form

Needs-based scholarships are available on a first-come, first-served basis. All information will be kept confidential. If applicant is a dependent, financial information must apply to parent/guardian. Incomplete applications that do not include supportive documentation cannot be processed.

Applicant Name \_\_\_\_\_

Program fee amount you can pay from:

\$\_\_\_\_\_ Savings/Income

\$\_\_\_\_\_ Gifts/school awards/other sources

+ \$\_\_\_\_\_ Pending aids/awards

= \$\_\_\_\_\_ Subtotal amount able to pay toward program fee

Journeys! Scholarship requested amount \$\_\_\_\_\_

Primary support (parent/guardian name(s)) \_\_\_\_\_

Address \_\_\_\_\_

Rent\_\_\_\_\_ Own\_\_\_\_\_ Monthly payment \$\_\_\_\_\_

Occupation \_\_\_\_\_

Employer phone (\_\_\_\_\_) \_\_\_\_\_

Other dependent children and ages

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Debt owed (explain in attached written statement) \$\_\_\_\_\_

I certify that the above and attached information is true to the best of my knowledge. My signature below verifies that if awarded a scholarship, I will abide by all rules and procedures of *Journeys!* Arts Camp and be an exemplary member of the *Journeys!* community.

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

Please be sure to attach a 2006 W-2 form and a written explanation of debt owed.