## Athena Camps Scholarship Application

#### **Scholarship Information**

Scholarship funding is a limited pool of funds that will be allocated to as many girls as possible. Therefore, if you are able to contribute to the cost of your child's camp the funds will reach a greater number of girls. The scholarships will be awarded in the form of waived or discounted registration fees via the registration on the website.

#### **Selection Process**

Scholarships will be awarded on a rolling basis based on the following:

- 1)
- 2) Camper response to attached questions

#### **Application Process**

Complete the attached scholarship application and email it by April 1. All applications must be submitted by April 1 to be considered.

Award recipients will be contacted by email provided on application by April 30. If you do not hear back, please reach out us at info@athenacamps.com

- 1. Complete the two-page Scholarship Application attached.
- 2. Email scholarship application to info@athenacamps.com

Questions: Call (408) 490-4972.

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### **Parent/Guardian Questions** Camper Name: \_\_\_\_\_ Age as of June 1: School Attending: \_\_\_\_\_ Current Grade: \_\_\_\_\_ City: \_\_\_\_\_\_Zip: \_\_\_\_\_ Parent/Guardian Name: Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Email: \_\_\_\_\_ Cell Phone: While financial need will not be the sole determining factor, it is the goal of the committee to award scholarships to girls who may not otherwise have the opportunity to attend Athena Camps. I certify that our household income is: \_\_\_\_\$0-\$20K \_\_\_\$21K-\$40 \_\_\_ \$41K-\$60K \_\_\_\_\$60K-\$80K \_\_\_\$80K+ Number of people living in the household: \_\_\_\_\_ Amount we can contribute: Optional: Please describe any other special circumstances that might affect your family's ability to afford the camp this year. I agree that I have read the scholarship conditions. To the best of my knowledge the enclosed information is correct. Further, I agree to release and discharge the Athena Camps, LLC and its officers, directors, and employees and agents of and from any claims, demands, or liability of damage arising from the participation of my child in any activities during Athena Camps. In addition, I understand photographs of classes may be taken and used for publicity or promotional purposes. Parent/Guardian Signature: Date: \_\_\_\_\_

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# **Camper Questions** Name: \_\_\_\_\_Age:\_\_\_\_ School:\_\_\_\_\_ Which camp are you applying for? (Please list your top 3 preferred dates and location) 1. Please tell us about yourself. 3 2. Please share with us some of your interests. 3. What would you like to do and learn this summer? 4. Why do you want to attend Athena Camps this summer?

5. Is there anything else special about you that you would like to share with us?