Summer Youth Aquatic, Adventure & Fitness Camps Scholarship Program

The Scholarship Program
The Summer Youth Camps are an opportunity for local youth to develop safe aquatic and outdoor skills while learning about themselves and the local environment. Center Activities welcomes all youth to have an opportunity to participate in these fun and educational programs. We are proud to offer scholarships for youth and their families with financial need for the summer season. Funding for the scholarship program is made possible by various agencies including the California State Parks Division of Safety Boating and Waterways, Humboldt Sponsors, and fundraising efforts. We greatly appreciate the generous support from these organizations, as the scholarship program would not be possible without them.

Scholarship Information
Scholarship eligibility will be based on the following:

- Family income
- Amount requested
- Camp availability
- Total number of scholarship requests submitted for a particular camp
- Remaining scholarship funds

How to Apply
All applicants for the scholarship program must:
1. Complete the enclosed application.
2. Provide proof of stated public assistance (if applicable) or, if not on assistance, provide proof of income (Please black out private information)
3. Complete all necessary registration paperwork and return with $25 registration fee per course. Only one scholarship per child will be awarded.
4. The scholarship deadline is two weeks prior to the start of the camp of choice. Scholarship applications may be returned to Center Activities at the following address or fax:

   Center Activities
   RE: Scholarship Application
   1 Harpst St.
   Arcata, CA 95521
   Fax: (707)826-3354

Awards & Notification
Scholarships are reviewed in the order they are submitted with the first review being May 1st. Scholarships are reviewed weekly after that date.

You will be notified via phone or email whether or not you receive an award. Your award notification will include an award confirmation deadline. If you do not confirm your award by the given deadline, your award may be cancelled!

If you did not receive an award and still wish for your child to participate in camp, the remaining balance will be due one week prior to the first day of the camp. Any remaining paperwork must be completed for the camp.
Eligibility
If you DO receive public assistance...
You will be eligible for a scholarship award if you receive any of the following listed below. In order to be considered, you must provide Center Activities with current proof that you are receiving one of the following:
1. Cal Fresh
2. Temporary Assistance for Needy Families (TANF)
3. Social Security Income (SSI)/Disability
4. Medi-Cal

If you DO NOT receive public assistance...
If you are not currently receiving any of the above, you may still be eligible for an award based on your income. Please complete all appropriate areas on the application form. You may be asked by Center Activities to provide a proof of your income. If it appears that you do not meet the eligibility guidelines as set below, but you have a unique financial situation, please use a separate piece of paper to describe your situation. We will consider applications that are received. Your income earnings should be listed as your gross earnings (before deductions), and is defined as the following:
1. Wages, salaries, commissions, and fees one receives as monetary compensation.
3. Dividends or interest on savings bonds, income from estates or trust, and rental income.
4. Alimony or child support payments.
5. Unemployment compensation.
6. Private pensions or annuities.
7. Government civilian employee payments or military retirement pension.

Income Eligibility Guidelines (*Before taxes based on current income sources)

<table>
<thead>
<tr>
<th>Family Size</th>
<th>Yearly Income*</th>
<th>Monthly Income*</th>
</tr>
</thead>
<tbody>
<tr>
<td>2</td>
<td>$37,050</td>
<td>$3,088</td>
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<tr>
<td>3</td>
<td>$41,700</td>
<td>$3,475</td>
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<tr>
<td>4</td>
<td>$46,300</td>
<td>$3,858</td>
</tr>
<tr>
<td>5</td>
<td>$50,050</td>
<td>$4,171</td>
</tr>
<tr>
<td>6</td>
<td>$53,750</td>
<td>$4,479</td>
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Reminder: Center Activities will consider ALL COMPLETED APPLICATIONS that are received. If you have a unique family, financial or medical situation, please use a separate sheet to explain. Scholarship funds are limited; so please limit your request to ONE CAMP PER CHILD and only ask for what you really need. You may be issued an award less than the amount requested, as Center Activities would like to assist as many families as possible!
Youth & Teen Aquatic & Adventure Camps
Scholarship Application

Please complete both sides of this application as completely and accurately as possible.

APPLICANT INFORMATION
Parent/Guardian Name:___________________________________________ Date:______________________
Mailing Address:_______________________________________________________________________________
Phone:__________________________ Email:___________________________________________________

CAMPER INFORMATION
Participant Name:___________________________________________ Amount Requested:________________
Camp Choice:___________________________________________________ Date(s):____________________
Participant Name:___________________________________________ Amount Requested:________________
Camp Choice:___________________________________________________ Date(s):____________________
Participant Name:___________________________________________ Amount Requested:________________
Camp Choice:___________________________________________________ Date(s):____________________

CURRENT HOUSEHOLD FINANCIAL INFORMATION
Number of Family Members in Household:_____ Total scholarship amount requested:______________

<table>
<thead>
<tr>
<th>Total Monthly Household Income</th>
<th>Total Monthly Household Expenses</th>
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<tbody>
<tr>
<td>Employment</td>
<td>Rent/Mortgage</td>
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<td>Child Support</td>
<td>Electricity/Gas</td>
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<td>Disability</td>
<td>Telephone</td>
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<td>SSI</td>
<td>Food</td>
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<tr>
<td>TANF</td>
<td>Other:</td>
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<td>WIC</td>
<td>Other:</td>
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<tr>
<td>Cal Fresh</td>
<td>Other:</td>
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<td>Other:</td>
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<td><strong>MONTHLY TOTAL</strong></td>
<td><strong>MONTHLY TOTAL</strong></td>
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Please include documentation of a state/federal assistance program for which you are currently enrolled. If you do
do not qualify, provide documentation of your income listed.
STATEMENT OF NEED

Please explain why you are requesting a scholarship from Center Activities. Please use the space provided below. If more space is needed, please feel free to attach additional pages as needed.

I certify that all of the above information is true and correct to the best of my knowledge. I understand that this information may be verified and is kept confidential. I understand that giving false or incorrect information will not only disqualify my application, but may be subjected to prosecution under applicable state and federal laws.

________________________________________ __________________________________ _______________
Signature               Printed Name    Date

Office Use Only

<table>
<thead>
<tr>
<th>Name</th>
<th>Registration Date</th>
<th>Deposit Amount</th>
<th>TRN # Initial</th>
<th>Scholarship Amount</th>
<th>TRN # Initial</th>
<th>Balance</th>
<th>TRN # Initial</th>
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