



## Camp Timbertop SCHOLARSHIP APPLICATION

Many gracious donors make it possible to provide scholarships to youth who would not otherwise be able to participate in Timbertop Camp. Timbertop Camp offers youth an incredible opportunity for personal growth, to build self-confidence, learn new skills, make friends and have, fun! **Please contact Timbertop at [info@timbertopcamp.org](mailto:info@timbertopcamp.org) or 715-869-6262 if you have questions regarding this application.**

### Application Process:

1. Complete the attached application form and all program registration materials, and return to Camp Timbertop as soon as possible. You will be notified about scholarship decisions within a few weeks of receiving your application. Scholarship requests are processed on a first come-first serve basis and limited to available funds.

Return to: [info@timbertopcamp.org](mailto:info@timbertopcamp.org) or by mail to: Camp Timbertop, PO Box 423, Plover, WI 54467

### 2. When completing the application, please note:

\_\_\_ A School District or Social Services Representative must sign and confirm eligibility for Free or Reduced Meals, FoodShare, or W-2 Cash benefits; **OR** Income Verification must be attached. **Not being eligible for free or reduced school meals, FoodShare or W-2 Benefits does not disqualify potential scholarships.**

\_\_\_ Parents/guardians be sure to **fully complete** all sections and requirements of this application and the camp registration form. Remember to list all reasons or circumstances that you feel should be considered in the scholarship selection process. You may attach additional pages.

\_\_\_ Section "To Be Completed By Youth" is to be filled out by the youth to the best of his/her ability (assist as needed).

3. **Once we have received your scholarship application and all registration/application materials a space will be reserved for you, unless it is full.** This space will be held until the date specified in your scholarship contract form. To guarantee a space after the hold date you will have to submit any required deposit/fee as indicated in your scholarship contract.
4. After receipt of your application, we may contact you to schedule an appointment to discuss a possible scholarship, family partnership amounts, payment schedule, and answer any questions you may have.
5. The information you provide is considered confidential and will be seen only by Timbertop Camp Directors.

Scholarship funds may be limited due to funding resources. We also urge you to think about what might be available in your community. Teachers and families have been instrumental in obtaining scholarships for their own students/children from local agencies and service organizations such as the Kiwanis, Rotary, Optimists, various outdoor clubs, Lion's Club, Association for Children with Learning Disabilities, local clubs/organizations, PTAs/PTOs and your school district. **If you know of a potential sponsor we encourage you to also contact them.**

**If you have any questions, please contact Camp Timbertop at 715-869-6262 or by email at [info@timbertopcamp.org](mailto:info@timbertopcamp.org).** We are looking forward to a summer of great adventures and fun!

### **Camp Timbertop (Mailing Address)**

P.O. Box 423 • Plover, WI 54467 • 715-869-6262 • [www.timbertopcamp.org](http://www.timbertopcamp.org) • [info@timbertopcamp.org](mailto:info@timbertopcamp.org)

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PO Box 423, Plover, WI 54467 715-869-6262 [info@timbertopcamp.org](mailto:info@timbertopcamp.org)

Date \_\_\_\_\_

**-CONFIDENTIAL-**

Name of Youth Applicant \_\_\_\_\_ Age \_\_\_\_\_ Date of Birth \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Grade \_\_\_\_\_ School \_\_\_\_\_ Parents Email \_\_\_\_\_

Parent/Guardian Name(s) \_\_\_\_\_ Phone(s) \_\_\_\_\_

**PERSONS RESIDING IN HOUSEHOLD:**

<u>Name</u>	<u>M/F</u>	<u>Birth Date</u>	<u>Age</u>	<u>Grade</u>	<u>School/Employer</u>
_____	_____	___/___/___	_____	_____	_____
_____	_____	___/___/___	_____	_____	_____
_____	_____	___/___/___	_____	_____	_____
_____	_____	___/___/___	_____	_____	_____
_____	_____	___/___/___	_____	_____	_____

- Have you ever applied for a Scholarship before?  YES  NO When: \_\_\_\_\_

**HOUSEHOLD INCOME:**

*Household Income Monthly	\$ _____	<i>*Include GROSS income (before taxes) from ALL adults in household.</i>
Monthly Child Support/Alimony	\$ _____	
Monthly Social Security	\$ _____	
Other Income/Aid/Government Assistance (i.e. unemployment, pension, grants, subsidies)	\$ _____	
<b>Total Monthly Income</b>	<b>\$ _____</b>	
<b>Annual Total Income</b>	<b>\$ _____</b>	Tell us how much you feel you could pay toward the program you are applying for: \$ _____

**One of the Following Verifications Required:**

- Youth Applicant currently receives (check one)  Free or  Reduced Meals at the above listed School and/or receives benefits from  FoodShare and/or  W-2 Cash Benefits. All required applications are current with the School and/or Social Services.

<i>Authorized School or Social Services Representative</i>	<i>Signature</i>	<i>Contact Phone # and Location</i>
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**OR**

- Include Previous Year Tax Form and Last 2 Pay Stubs (for each adult household member) PLEASE! Black out Personal information like Social Security numbers, birth dates and account numbers.

**OVER**

**TO BE COMPLETED BY PARENT/GUARDIAN:**

1. Why do you believe it will be of value to have your son/daughter participate in Timbertop Camp

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2. What do you hope your son/daughter will gain from this Camp experience? \_\_\_\_\_

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3. List any other reasons or financial circumstances you would like us to consider (i.e. why there is a scholarship need)? \_\_\_\_\_

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**TO BE COMPLETED BY YOUTH:**

1. Tell us why you would like to go to Camp? \_\_\_\_\_

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2. How do you like to spend your spare time? What hobbies do you have? \_\_\_\_\_

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**BOTH YOUTH AND PARENT/GUARDIAN:**

I hereby testify that all of the information listed on this application is correct. I authorize the social service department and our School District to release any information pertaining to these facts to Timbertop. Failure to provide accurate information may jeopardize receiving a scholarship award.

Signature of Parent/Guardian \_\_\_\_\_ Signature of Youth \_\_\_\_\_