

SCHOLARSHIP ASSISTANCE APPLICATION

We are glad you are interested in sending your child to Camp Timberline. The following information will be required to determine if you are eligible for financial assistance under the Camp Timberline scholarship program:

PERSONAL

Name of Parents/Guardians _____

Name of Camper and Session Requested _____

Camp Timberline's policy is ONE scholarship per family.

Home Address (street, city, state, zip)

Contact Information:

Home Phone _____ Cell Phone _____

E-Mail Address _____

Names, ages and birth dates of children living with you.

Are you married, single or divorced? _____

If you are divorced, do you receive child support? What amount? _____

Do you own or rent your residence? _____

What is the amount of your monthly rental or mortgage payment? _____

What other financial assistance do you receive? _____

EMPLOYMENT

Parent and/or Guardian #1 Place of Employment

Description of your job _____

Number of years at this job _____

Yearly Salary or Wages - \$ _____ per year OR \$ _____ per hour/ _____ hrs weekly

Parent and/or Guardian #2 Place of Employment

Description of your job _____

Number of years at this job _____

Yearly Salary or Wages - \$ _____ per year OR \$ _____ per hour/ _____ hrs weekly

GENERAL INFORMATION

Why do you want your child to attend Camp Timberline?

Has your child ever been to a camp before? If so, describe their camp experience.

The full tuition for one week at Camp Timberline is dependent upon the program selected. You will be obligated to make a partial contribution toward this tuition for your camper since Camp Timberline believes your camper's experience at camp will be enhanced if you contribute toward this experience. With this in mind, how much will your family be able to contribute towards the total tuition amount? \$_____

Please set forth your current situation which leads you to apply for financial help:

After you have completed this Scholarship Assistance Application please mail to:

Camp Timberline
430 Canyon Avenue
Fort Collins, CO 80521

Or email to office@camptimberline.com

Applications are submitted for review monthly to the Scholarship Committee. The committee will determine your eligibility for financial assistance. When their recommendations are made, you will then be notified via email of any assistance we are able to provide.

Date: _____
Name of Parent or Guardian (please print)