



2019 Alexandria 4-H Camp Scholarship Program



Philosophy and Purpose

Each summer, the Northern Virginia 4-H Center offers an exceptional camp for youth ages 9-18, bringing together people of diverse backgrounds, religions, races, and cultures. The purpose of the Arlington 4-H Scholarship and Tuition Assistance Program is to create a diverse camp population by providing financial support to young people who would not otherwise have the resources to participate.

Eligibility for Assistance

Applicants must demonstrate financial need based on the application and parent/guardian's 2017 IRS tax return. Not all eligible applicants will receive an award, as funds are limited. Youth will be accepted without regard to race, color, national origin, sex, religion, disability, political beliefs, sexual orientation, family status, or any other protected status.

We do not offer 100% scholarships. Scholarship awardees will be required to *pay a minimum of \$75 for campers or \$50 for counselors* towards lodging and food costs.

Scholarship applications are due Friday, April 26 by 5:00 PM.

We will contact scholarship applicants with information of their final scholarship award and remaining balance by Friday, May 3. If we have funds remaining after the deadline, we may accept additional applications. After scholarship decisions are announced, families will have two weeks to accept the scholarship or request a full refund. **Families receiving scholarships are required to pay their remaining balance (if applicable) by May 31, 2019.**

Criteria for Awards

Scholarships are based on: 1) Financial need 2) Potential for growth and development through the 4-H Camping experience and 3) Funding Availability.

How to Apply

Applicants must submit a completed Scholarship Application. Incomplete applications will not be reviewed. All applications are due Friday, April 26 by 5:00 PM.

Supporting Documents:

Applicants who receive benefits should also bring the following:

- Free or Reduced Lunch Verification Letter
- Verification of SNAP/Medicaid benefits
- Any other supporting documents you deem relevant

If you have any questions, please contact Alexandria 4-H Extension Agent
Reggie Morris at 703-746-5546 or rbmorris@vt.edu



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If you are a person with a disability and desire assistance or accommodation, please notify Caitlin Verdu, Arlington Cooperative Extension Office at (703)228-6404 during business hours of 8:00 a.m. and 5:00 p.m.

Scholarship Application

Fairfax, Arlington, Alexandria 4-H Camp

June 30 – July 4, 2019

YOU MUST RETURN THIS COMPLETED FORM TO BE CONSIDERED FOR A SCHOLARSHIP.

Camper/Counselor Information:

Name: _____
(Please use the same name that you put on your registration form.)

Home Address: _____

Home Phone: _____ E-mail: _____

Date of Birth: _____ Grade: _____ Age: _____

Parent/Guardian Information:

Guardian 1's Name: _____ Guardian 2's Name: _____

Occupation: _____ Occupation: _____

Employer: _____ Employer: _____

Family Information:

1. How many people are in your household? _____

2. **What is your family's Adjusted Gross Income (AGI)?** This is the bottom number on page 1 of your 2017 Tax Return. _____

3.

Does the child/family receive any of the following? **If so, present supporting document(s):**

Medicaid ___ Yes ___ No

SNAP ___ Yes ___ No

Free or Reduced Lunch ___ Yes ___ No

4. Has the child attended 4-H camp before? Yes No

5. Has the child attended another camp before? Yes No

a. If yes, where? _____

b. How was that attendance funded? (Who paid for it?) _____

What amount of scholarship are you requesting? \$ _____

Campers and Counselors in Training: Camp cost is \$350. The maximum scholarship amount is \$275. Each family is asked to pay at least \$75 toward lodging and food costs. **Counselors:** Camp cost is \$150 after the Feb 16 deadline. The maximum scholarship amount is \$100. Each family is asked to pay at least \$50 toward lodging and food costs.

Mail or Deliver this form to:

Alexandria Cooperative Extension, Attn: 4-H Camp, 1108 Jefferson St. Alexandria VA 22314

If there are reasons beyond family income that we should take into account, please provide them here. **All information will remain confidential.**

Merit Statement *REQUIRED* This section must be completed by the child:

Tell us about a challenge or new experience you have faced. What was the most important thing you learned from it? Do you still use that lesson in your life today?

I certify that all of the above information is true and correct. I understand that my child may or may not receive a partial scholarship to attend camp. Priority is based on financial need and merit.

Child's Signature

Date

Parent/Guardian's Signature

Date