

SCHOLARSHIP APPLICATION

Fill out form completely. Failure to do so will result in a delay in processing the form. Any false information can result in your denial for assistance. **The following information is required:**

- Membership Application must be completed (online at www.BGC-LNV.org)
- Most recent tax year 1040 Tax Form *or* current year's W2 must be attached
- Most recent four weeks of work pay stubs
- If divorced, copy of court decree outlining amount of support due monthly
- If you receive SS/Disability, you must include document outlining your monthly benefits
- If you are currently unemployed, you are not eligible for a scholarship

Incomplete applications will be returned. Applications is responsible for making copies of all required documents. ORIGINALS WILL NOT BE RETURNED.

Child's Information

Child's Name _____

Address _____

City _____ State _____ ZIP _____

Phone _____

Age _____ Date of Birth _____

School _____ Grade _____

How long has child been a Club member? _____ Club Membership # _____

Weeks child will attend camp: Week 1 Week 2 Week 3 Week 4 Week 5
 Week 6 Week 7 Week 8 Week 9 Week 10

Parent's Information - ALL INFORMATION IS REQUIRED to process your application

Mother's Name _____ Phone # _____

Place of Employment _____

Father's Name _____ Phone # _____

Place of Employment _____

Married Divorced Separated Single

Annual Family Income _____

Total # Adults Living in Household _____ Total # Children Living in Household _____

Are you receiving any money from other sources? Yes No

Please explain briefly why you are applying for a scholarship.

Have you received a scholarship in the past? If yes, please provide details. Yes No

This does NOT mean you will automatically get a scholarship this year.

Parent's/Guardian's Signature _____ Date _____

Office Use Only

Accepted Denied Amount Parent/Guardian will pay: _____ Weekly Monthly Yearly