



## **Summer Resident Camp, Teen Leadership & Adventure Trips** **SCHOLARSHIP APPLICATION**

The United Way of Portage County, the YMCA Strong Kids Campaign and many other gracious donors make it possible to provide scholarships to youth who would not otherwise be able to participate in these programs. These programs offer youth an incredible opportunity for growth, leadership, and most importantly, FUN! Please refer to the specific brochure for each program that outlines the program description, dates, and details. *Please contact the Child Development Office at 715-342-2999 for scholarship information on our Summer DAY Camps.*

### **Application Process:**

1. Complete the attached application form and all program registration materials, and return to the YMCA before **April 1<sup>st</sup>**. Scholarship decisions may be made after **April 1<sup>st</sup>**. You will be notified of our decisions by April 15<sup>th</sup>. **Any scholarship requests received after April 1<sup>st</sup> will be processed on a first come-first serve basis and then based on family need and the availability of funds.**

**Return to: Pete Matthai – Camp Director, Stevens Point Area YMCA, 1000 Division Street, Stevens Point, WI 54481**

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

\_\_\_ Income verification must be attached

\_\_\_ Parents/guardians be sure to **fully complete** all sections and requirements of this application and the camp registration. 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. **FOR TIMBERTOP APPLICANTS ONLY:** Applicants must also include a letter from the school principal, child’s teacher or social worker supporting why the applicant would be a good scholarship recipient, as well as any additional background information on why they would like the child to attend Timbertop.
4. **Once we have received your scholarship application and all registration/application materials a space will be reserved for you in the first program you requested, unless it is full.** This space will be reserved until May 1<sup>st</sup>. To guarantee a space after May 1<sup>st</sup> you must have submitted the required deposit/fee or as indicated in your scholarship contract.
5. 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.
6. The information you provide is considered confidential and will be seen only by the YMCA professional staff.

### **Scholarship funds may be limited for residents outside of Portage County depending on the availability of outside sources.**

We urge you to think about what is available in your community. Teachers and families have been instrumental in obtaining scholarships for their own students/children from local agencies and service organization such as the Kiwanis, Rotary, Optimists, 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 contact them.**

If you have any questions, please contact Pete Matthai, Camp Director at 715-342-2980, ext 308 or by email at [pmatthai@spymca.org](mailto:pmatthai@spymca.org)  
. We are looking forward to a summer of great adventures and fun!

### **Stevens Point Area YMCA (Business)**

1000 Division Street • Stevens Point, Wisconsin 54481 • 715-342-2980 • fax: 715-342-2987 • [www.spymca.org](http://www.spymca.org)

### **YMCA Camps at Glacier Hollow (June – August)**

P.O. Box 142 • 9289 Pavelski Road • Nelsonville, WI 54458 • 715-824-5267 • [www.glacierhollow.com](http://www.glacierhollow.com)

**YMCA Resident Camp, Teen Leadership & Adventure Trips  
SCHOLARSHIP APPLICATION**

Stevens Point Area YMCA, 1000 Division Street, Stevens Point, WI 54481 715-342-2980 ext. 308

**~~CONFIDENTIAL~~**

Date \_\_\_\_\_

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

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

County \_\_\_\_\_ Parents Email \_\_\_\_\_

Telephone \_\_\_\_\_ Grade \_\_\_\_\_ School \_\_\_\_\_

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

Telephone-Work \_\_\_\_\_ Home \_\_\_\_\_

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**Indicate your choice of program(s):**

\_\_\_ Resident Camp(s) Please list session and dates \_\_\_\_\_

\_\_\_ Teen Adventure Trip(s) Please list session and dates \_\_\_\_\_

\_\_\_ Teen Leadership Training Camp & Counselors In Training How many weeks \_\_\_\_\_ How many days/week \_\_\_\_\_

*Please contact the Child Development Office at 715-342-2999 for scholarship information on our Summer DAY Camps.*

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**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 YMCA Scholarship before? YES NO When: \_\_\_\_\_

Are you (or your child) a current YMCA Member? YES NO

**HOUSEHOLD INCOME:**

Verification Required: \_\_\_ Previous Year Tax Form and  
\_\_\_ Last 2 Pay Stubs (for each household member)

\*Household Income Monthly \$ \_\_\_\_\_  
 Monthly Child Support \$ \_\_\_\_\_  
 Monthly Social Security \$ \_\_\_\_\_  
 Other Income (Unemployment, pension, ...) \$ \_\_\_\_\_  
 Total Monthly Income \$ \_\_\_\_\_  
 Annual Income \$ \_\_\_\_\_

*\*Include GROSS income from ALL adults in household.*

Please tell us how much you feel you could pay toward the program you are applying for: \$ \_\_\_\_\_

**OVER**

**TO BE COMPLETED BY PARENT/GUARDIAN (Attach additional pages if necessary):**

**1. Why do you believe it will be of value to have your son/daughter participate in one of the YMCA Summer Camp Programs?** \_\_\_\_\_

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**2. What do you hope your son/daughter will gain from this 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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Remember, Timbertop applicants must also include a letter from the school principal, child's teacher, or social worker supporting why the applicant would be a good scholarship recipient, as well as why they would like the child to attend Timbertop.

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**TO BE COMPLETED BY YOUTH:**

**1. Tell us why you would like to participate in the program?** \_\_\_\_\_

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

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**3. Please share with us how you use the YMCA Four Character Values (Caring, Honesty, Respect, and Responsibility) in your every day life.**

<b>CARING</b>	<b>How?</b> _____
<b>HONESTY</b>	<b>How?</b> _____
<b>RESPONSIBILITY</b>	<b>How?</b> _____
<b>RESPECT</b>	<b>How?</b> _____

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**BOTH YOUTH AND PARENT/GUARDIAN:**

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

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