



CAC SUMMER ARTS CAMP SCHOLARSHIP APPLICATION

Postmark Deadline: May 1, 2017
Scholarship Notifications: May 9, 2017

PLEASE COMPLETE THIS FORM AND SUBMIT TO:

CAC Education Department
900 Camp Street
New Orleans, LA 70130

Summer Arts Camp Scholarship Guidelines:

- Incomplete applications will not be reviewed.
- Scholarships will be awarded based upon need and merit.
- Applicants are evaluated without regard to race, religion, natural origin, sex, or physical ability.
- Funding is limited and scholarships are not guaranteed to all applicants.
- Scholarships are only available for one week of camp, excluding aftercare and memberships.

Please fill out one application form per child.

Name of Child _____ Birthdate ____/____/____

Grade _____ School _____

Need Type:

Financial Merit

Amount Type:

Full Partial

Please select the camp week you are applying for:

July 10—14 July 17—21 July 24—28 July 31—August 4

REQUIRED FAMILY INFORMATION

Parent or Legal Guardian _____

Address _____

City _____ State _____ Zip _____

Phone (_____) _____ Email _____

Place of Employment _____

Occupation _____

Parent or Legal Guardian _____

Address (if different) _____

City _____ State _____ Zip _____

Phone (_____) _____ Email _____

Place of Employment _____

Occupation _____

FINANCIAL INFORMATION

Please indicate your total annual household income from all sources (including wages, interest income, investments, alimony, child support, social security, public assistance):

- | | | |
|--|--|--|
| <input type="checkbox"/> Below \$10,000 | <input type="checkbox"/> \$25,001-\$30,000 | <input type="checkbox"/> \$45,001-\$50,000 |
| <input type="checkbox"/> \$10,001-\$15,000 | <input type="checkbox"/> \$30,001-\$35,000 | <input type="checkbox"/> \$50,001-\$55,000 |
| <input type="checkbox"/> \$15,001-\$20,000 | <input type="checkbox"/> \$35,001-\$40,000 | <input type="checkbox"/> \$55,001-\$60,000 |
| <input type="checkbox"/> \$20,001-\$25,000 | <input type="checkbox"/> \$40,001-\$45,000 | <input type="checkbox"/> \$65,001-\$70,000 |
| <input type="checkbox"/> \$70,000+ | | |

Does your child qualify for free or reduced lunch? Yes No

How many children currently live in the household? _____ Adults? _____

Please list their ages: _____

Are there any extenuating circumstances, permanent or temporary, that make financial assistance necessary at this time?

Please provide information about your camper (age, interests, academic or community achievements, etc).

What impact do you hope that Summer Arts Camp will have on your child or your family?

What is your previous experience at the Contemporary Arts Center?

Has anyone in your family previously received assistance through our program? Yes No

If yes, please specify the type and history of assistance. _____

All the information in this application is true and complete to the best of my knowledge.

Parent/Guardian Signature

Date