



Science Summer Camp - 2018
Scholarship Application

There may be an opportunity for a limited number of students to the Nazareth College Summer Science Camp to receive a scholarship. All scholarships are on a space available basis and will not be awarded until June 18th. Scholarships may be full (covering one week of camp fees) or 50% (covering \$175 of the fees with family paying the remaining \$175).

Scholarships are awarded based on **demonstrated financial need**. It is the family's responsibility to include evidence of need. They could include evidence of qualification of child's eligibility for free/reduced lunch or other appropriate documentation.

Children accepted for this camp will be able to participate in a maximum one week of camp. Camps start at 9:00 AM (Drop off beginning at 8:30 AM). Camp ends at 4:30 PM (Pick-up by 5:00 PM).

Transportation to and from camp is not provided. Each application for scholarship must include:

- 1) **Completed Application form (below)**
- 2) **Recommendation from child's teacher/school.**
- 3) **Completed Code of Conduct, Health, and Emergency Release forms.**
- 4) **Evidence of Financial need.**

Applications are due by **Friday, June 1, 2018.**

Applications can be mailed to:

William Lammela, Camp Director
Nazareth College
4245 East Avenue
Rochester, NY 14618

For further information, contact Camp Director at wlammel8@naz.edu or 389-2580.
FAX—(585)-389-2672

Name of Child:		Birth Date:	
Primary Address:	City:	State:	Zip:
Name of Parent/Guardian:			
Home Phone:		Parent/Guardian Cell Phone:	
Email Address:			
Primary Physician:			Phone:
Emergency Contact (other than parent):			Phone:

Name of Teacher Sending Recommendation:	
If your child is awarded a scholarship, they will receive one session of camp. Please CIRCLE the week(s) your child would be available to attend camp. Then indicate your child's first choice (#1), second choice (#2), etc.	
July 9—Harry Potter Magic	July 23—Harry Potter Magic
July 16—Superhero Science	July 30— Mystery at Hogwarts: CSI
Parent/Guardian Signature:	
Please print Parent/Guardian Name:	
Allergies or Medical Conditions to be noted:	
Additional Comments Relevant to Scholarship Application:	